



RAIN CATCHMENT SOURCE SEASONAL START- UP INSPECTION FORM

The Revised Total Coliform Rule has specific requirements for owners of seasonal public water systems. Experience indicates that depressurizing and dewatering of seasonal water systems may allow contamination to enter and spread throughout the system. As a preventative public health measure, owners of seasonal water systems are required to inspect, clean and sanitize their system. **Failure to complete the start-up procedures prior to serving water to the public will incur a violation. This form must be submitted (or postmarked) to the department within 10 days of serving water to the public.**

Inspection and repair of the system should be planned well in advance of opening your system. It is important to leave yourself plenty of time for unanticipated repairs and sampling.

PWS Information

PWS Name: _____ PWSID: _____

Date Start-up Procedure completed: _____

Date Open or Planned Opening Date (serving water to public): _____

Cistern and Roof

- ☐ Check the roof and gutters, and remove any debris
- ☐ Check that asphaltic shingles or galvanized metals have not been added to the roof
- ☐ Check for and repair settling or cracking of the cistern foundation
- ☐ Check for and remove any tree limbs overhanging the roof
- ☐ Check that the cistern and its cover are light proof to minimize algal growth
- ☐ Check for sediment buildup at the cistern bottom, remove sediment and sanitize
- ☐ Check that the pump intake is clean and drawing water from above the cistern bottom
- ☐ Check that the cistern overflow pipe opening is screened and empties a minimum of two times the diameter of the pipe above the ground surface
- ☐ Check that the cistern access hatch is sealed and locked

Pumps

- ☐ Check that the electrical wiring is properly installed and protected
- ☐ Check the pump for excessive vibration, noise, leaks or overheating

Pressure Tanks

- ☐ Check the pressure relief valve and verify it is working properly
- ☐ Check to ensure the hydronic tank air charge is at the correct pressure
- ☐ Check that pressure controls work properly and are set to maintain at least 20 psi

Water Storage Tank(s)

☐ System does not have water storage tanks (if checked, skip to next section)

- ☐ Inspect, clean and sanitize your storage tank(s)
- ☐ Check that the tanks are structurally sound and without cracks or holes
- ☐ Check that overflow and drain lines are properly screened or covered, and the lines terminate a minimum of two times the diameter of the water outlet pipe above the ground
- ☐ Check that the access hatch is sealed and locked

Chlorination

- ☐ Check that the chlorine was replaced with a fresh supply
- ☐ Check that the chlorine residual test kit is working and that reagents are not expired
- ☐ Check the chlorinator pump and tubing for damage, corrosion and leaks
- ☐ Check and inspect the chemical feed pump to verify it is working properly

Other Methods of Treatment ☐ System does not have filters or treatment (if checked, skip to next section)

- ☐ Check and replace any filters and media according to the manufacturer's guidelines
 - ☐ Check that the treatment system is working properly
 - ☐ Check that there is an adequate air gap at any treatment process waste line and the waste drain
- There are many different methods of treatment, so if you have any questions about your system's treatment setup that your manual cannot answer, call the manufacturer or the DEC engineering staff*

Distribution Lines

- ☐ Check all areas of the distribution system to ensure there is adequate pressure
- ☐ Check the distribution system for leaks under pressure
- ☐ Check for any dead end lines in distribution and flush them
- ☐ Check each valve and shutoff assembly to ensure they work properly under pressure
- ☐ Check for atmospheric vacuum breakers on all hose bibs
- ☐ Check all cross connection control assemblies and replace or have a certified technician repair if necessary
- ☐ Check that drinking water lines cannot reach nearby RV sewer dump stations, or isolate the potable water lines near the station with a cross connection control assembly

After performing the listed checks and making any repairs or alterations as necessary, disinfect and flush the system to confirm the system is ready to serve water to the public:

- Follow disinfection procedures available on our Disinfection of Wells and Small Distribution Systems webpage at: <https://dec.alaska.gov/eh/dw/security/security-resources/drink-it-pure/> Be careful to use the proper dosage and holding time for the disinfection process. Inexpensive kits for measuring chlorine residual can be found at a hardware or pet supply store.
- After disinfection and prior to serving water to consumers, it is recommended that a total coliform sample be collected to confirm your system is disinfected. Coliform sampling procedures are available on our Sampling webpage at: <https://dec.alaska.gov/media/14511/brochures-tcr4.pdf>
- After checking the appropriate boxes and briefly describing any issues encountered during the startup process, sign the certification statement below and send the form in to your Environmental Program Specialist, by fax or e-mail address listed below.

If you are planning expansion or modifications to your system, please contact the Drinking Water Engineering staff prior to beginning any work to check if you need to go through engineering plan review.

If you have any other questions or concerns, contact Drinking Water Program staff at your local office:

Anchorage DEC Office	Fairbanks DEC Office	Soldotna DEC Office	Wasilla DEC Office
555 Cordova Street	610 University Ave.	43335 K-Beach Road, Suite 11	1700 E. Bogard Road
Anchorage, AK 99501	Fairbanks, AK 99709	Soldotna, AK 99669	Building B, Suite 103
Fax: 269-7650	Fax: 451-2188	Fax: 262-2294	Wasilla, AK 99654
Phone: 269-7623 or (866) 956-7656	Phone: 451-2108 or (800) 770-2137	Phone: 262-5210	Fax: 376-2382
DEC.DWData.Anchorage@alaska.gov	DEC.DWData.fairbanks@alaska.gov	dec.dwddata.soldotna@alaska.gov	Phone: 376-1850
			DEC.DWData.wasilla@alaska.gov

Completion of Startup Procedures Certification Statement

As a representative of the PWS, I certify that the required startup procedures were completed prior to serving water to the public as indicated on this form.

Name (printed): _____

Signature: _____ Date: _____

Describe any problems encountered and corrections made: (if needed, use additional sheet)