

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Total Trihalomethanes (TTHM) & Haloacetic Acid 5 (HAA5) Violation at Rensselaerville Water District No. 1

Our water system recently violated a drinking water standard. Although this incident was not an emergency, as our customers, you have a right to know what happened and what we are doing to correct this situation.

We routinely monitor for the presence of drinking water contaminants. Testing results from November 2022 to November 2023 show that our system exceeds the standard, or maximum contaminant level (MCL), for the long term running annual average (LRAA) for TTHM and HAA5.

The standard for TTHM is ≤ 80 ug/L and for HAA5 is ≤ 60 ug/L. It is determined by averaging all the samples collected for the past 12 months.

The LRAA for TTHM & HAA5 for November 2022 to November 2023 was 93.6 ug/L and 80.3 ug/L respectively.

November 2, 2023 sample results were TTHM: 93.6 ug/L, and HAA5: 80.3 ug/L

What should I do?

- There is nothing you need to do. You do not need to boil your water or take other corrective actions. If a situation arises where the water is no longer safe to drink, you will be notified within 24 hours.
- If you have a severely compromised immune system, have an infant, are pregnant, or are elderly, you may be at increased risk and should seek advice from your health care providers about drinking this water.

What does this mean?

This is not an emergency. If it had been an emergency, you would have been notified within 24 hours.

TRICHALOMETHANES

Trihalomethanes are a group of chemicals that are formed in drinking water during disinfection when chlorine reacts with naturally occurring organic material (e.g., decomposing vegetation such as tree leaves, algae or other aquatic plants) in surface water sources such as rivers and lakes. They are disinfection byproducts and include the individual chemicals chloroform, bromoform, bromodichloromethane, and chlorodibromomethane. The amount of trihalomethanes formed in drinking water during disinfection can change from day to day, depending on the temperature, the amount of organic material in the water, the amount of chlorine added, and a variety of other factors.

Disinfection of drinking water by chlorination is beneficial to public health. Drinking water is disinfected by public water suppliers to kill bacteria and viruses that could cause serious illnesses, and chlorine is the most commonly used disinfectant in New York State. All public water systems that use chlorine as a disinfectant contain trihalomethanes to some degree.

Some studies suggest that people who drank water containing trihalomethanes for long periods of time (e.g., 20 to 30 years) have an increased risk of certain health effects. These include an increased risk for cancer and for low birth weights, miscarriages and birth defects. The methods used by these studies could not rule out the role of other factors that could have resulted in the observed increased risks. In addition, other similar studies do not show an increased risk for these health effects. Therefore, the evidence from these studies is not strong enough to conclude that trihalomethanes were a major factor contributing to the observed increased risks for these health effects. Studies of laboratory animals show that some trihalomethanes can cause cancer and adverse reproductive and developmental

effects, but at exposures much higher than exposures that could result through normal use of the water. The United States Environmental Protection Agency reviewed the information from the human and animal studies and concluded that while there is no causal link between disinfection byproducts

(including trihalomethanes) and human health effects, the balance of the information warranted stronger regulations that limit the amount of trihalomethanes in drinking water, while still allowing for adequate disinfection. The risks for adverse health effects from trihalomethanes in drinking water are small compared to the risks for illness from drinking inadequately disinfected water. (3/2016)

HALOACETIC ACIDS

Haloacetic acids are disinfection byproducts formed during treatment of drinking water by chlorine, the most commonly used disinfectant in New York State. Drinking water is disinfected by public water suppliers to kill bacteria and viruses that could cause serious illnesses. For this reason, disinfection of drinking water by chlorination is beneficial to public health. The amount of haloacetic acids in drinking water can change from day to day, depending on the temperature, the amount of organic material in the source water, the amount of chlorine added, and a variety of other factors.

The following paragraph summarizes and characterizes the available studies on human populations exposed to haloacetic acids, and provides a general summary of the health effects of haloacetic acids in animals, which occur at exposure levels much higher than exposures that could result through normal use of the water.

Some studies suggest that people who drank chlorinated drinking water containing disinfection by-products (including haloacetic acids) for long periods of time (e.g., 20 to 30 years) have an increased risk for cancer. However, how long and how frequently people actually drank the water, and how much haloacetic acids the water contained is not known for certain. Therefore, the evidence from these studies is not strong enough to conclude that the observed increased risk for cancer is due to haloacetic acids, other disinfection by-products, or some other factor. Studies of laboratory animals show that the two haloacetic acids, dichloroacetic acid and trichloroacetic acid, can cause cancer following exposure to high levels over their lifetimes. Dichloroacetic acid and trichloroacetic acid are also known to cause other effects in laboratory animals after high levels of exposure, primarily on the liver, kidney, and nervous system and on their ability to bear healthy offspring. The risks for adverse health effects from haloacetic acids in drinking water are small compared to the risk for illness from drinking inadequately disinfected water. (10/2018)

What is being done?

After consulting with NY Rural water and approval from Albany County DOH, we have been augmenting the raw water with sodium permanganate. We also are currently using 2 aerators on the raw influent at the slow sand filter plant to add more dissolved oxygen to the raw water.

For more information, please contact Water Operator John Rice at (518) 810-7219 or email: kenlodge@hotmail.com.

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