

Massachusetts Department of Environmental Protection - Drinking Water Program

LCR-D

Lead and Copper - 90th PERCENTILE COMPLIANCE Report

	(Fo	r Sy	stems Re	quire	d to Col	lect l	More Than	5 Sa	mples)				•			
I. PWS INFORMATION: Please refer to your DEP Lead & Copper sampling plan for approved sampling locations.																	
PWS ID #:		2034010 Ci						y / Tow	n: Bo	Bolton							
PWS Name:		Nash	oba Regional	a Regional High School						PWS Class: COM N					INC 🗵		
Sam	nlina	☐ FIRST SEMI-ANNUAL SAMPLING PERIOD								☐ REDUCED - EVERY THREE YEARS							
Sampling Frequency: (choose one)		☐ SECOND SEMI-ANNUAL SAMPLING PERIOD								☐ LEAD SERVICE LINE (LSL) REPLACEMENT PROGRAM							
		▼ REDUCED – ANNUAL								☐ DEMONSTRATION							
							o highest valu										
							tory's reported										
	limit (MDL) but below 0.005 mg/L for lead or 0.05 mg/L for copper shall be reported as measured or may be reported as 0.0025 mg/L for lead or 0.025 mg/L for copper.																
Step	Step 2: Multiply the total number of samples collected by 0.9 (this is your 90 th percentile sample number). Round to the nearest whole number, if																
	necessary. <u>Step 3:</u> Compare the sample result at the 90th percentile sample number against the corresponding action level. If the 90th percentile value is higher																
							e required to c										
Note	: Do not inclu	ıde sc	hool results of	n this	form unles	s the I	PWS is a scho	ool. Rer									
the p	ersons serve		•			10 CN	MR 22.06B(6)	(c) ¹ .									
LEAD RESULTS (mg/L)										COPPER RESULT							
#	Results	#	Results	#	Results	#	Results	#	Result		#	Results	#	Results	#	Results	
1*	0	16	0.008	31		46		1*	0.067		16	0.148	31		46		
2	0	17	0.012	32		47		2	0.094	_	17	0.149	32		47		
3	0	18	0.013	33		48		3	0.102	-	18	0.150	33		48		
4	0	19	0.015	34		49		4	0.107		19	0.150	34		49		
5	0	20	0.016	35		50		5	0.107		20	0.153	35		50		
6	0	21		36		51		6	0.110	_	21		36		51		
7	0	22		37		52		7	0.112		22		37		52		
9	0	23		38		53 54		9	0.113	_	23 24		38 39		53 54		
10	0.001	25		40		55		10	0.115	_	25		40		55		
11	0.001	26		41		56		11	0.117		26		41		56		
12	0.003	27		42		57		12	0.122		27		42		57		
13	0.005	28		43		58		13	0.120	-	28		43		58		
14	0.005	29		44		59		14	0.141		29		44		59		
15	0.007	30		45		60		15	0.145		30		45		60		
	est Value	00		.0		00		.0	0.110		00		.0		00		
		m wa	s required t		20 lea	ad an	d copper sar	mples.	My sys	tem	collected	d: 20		lead and co	opper	samples.	
	My system was required to 20 lead and copper samples. My system collected: 20 lead and copper samples. Total # of samples collected: 20 x 0.9 = 18 This number is my system's 90 th percentile sample #.																
Circle the 90 th percentile sample # for both lead and copper in the table above, and enter the results in the appropriate spaces below.																	
						red to 0.015 mg/L				0.150				Compared to 1.3 mg/L			
(Lead result at 90 th percentile sample#)					=		(Copper result at 90 th percentile sample					(The copper action level)					
II. CI	(Lead result at 90 th percentile sample#) (The lead action level) (Copper result at 90 th percentile sample#) (The copper action level) II. CERTIFICATION:																
							mined by the R) reporting re								mmun	ty system	
you			as at or b e			•	,	quirein	ento in a	ICCOI	uance will	1310 CIVIN	22.10	M(4)(I)O.			
			xceeded th							sa	mplina si	tes excee	ded t	he lead act	ion le	/el.	
	_ , ., .							t # of sar	nples)		1 3						
	Check and complete the correct statement for copper as determined from the above results. If you have an exceedance and you are a community system you must comply with the Consumer Confidence Rule (CCR) reporting requirements in accordance with 310 CMR 22.16A(4)(i)6.																
syste	-							orting re	equireme	ents	in accorda	ince with 3	10 CM	IR 22.16A(4)	(1)6.		
			/as at or be xceeded th							62	mnlina ei	tos avcas	ded t	he copper	action	level	
	, 0,0			.5 50	. p.c. aoaoi			t # of sar	nples)	- 50	թ	.SO CAUGE	acu I	o oopper	2011011		
							ave been previo	usly app	roved in v								
	ly with 310 CM lete to the bes					v that I	am the person	authoriz	ed to fill a	out thi	s form and	the informati	on con	tained herein i	s true, a	ccurate and	
Manager - Water October 10th 20												2022					
Title Signature of PWS or Owner's Representative											OCIODEI	Date	2022				
Please submit Form LCR-C along with this form.						-							Page	1	of	1	
.01111.					Rev. 02- 2019							age		٠.	_		

¹ The Consumer notification form template is available at: https://www.mass.gov/ligits/lead-and-copper-forms-and-templates#lead-and-copper-rule-(lcr)-page 17