CITY OF SAN JOSE
CAPITAL OF SILICON VALLEY

Memorandum

TO: HONORABLE MAYOR AND CITY COUNCIL

FROM: Jeff Provenzano

SUBJECT: **See Below**

DATE: August 18, 2025

Approved  Date: 8/26/2025

COUNCIL DISTRICTS: 2, 7, 8

SUBJECT: San José Municipal Water System's 2025 Public Health Goals Report on Water Quality

RECOMMENDATION

(a) Conduct a public hearing regarding the San José Municipal Water System's 2025 Public Health Goals Report on water quality as required by the California Health and Safety Code.
(b) Approve the San José Municipal Water System's 2025 Public Health Goals Report and direct staff to file the report with the State Water Resources Control Board.

SUMMARY AND OUTCOME

A Public Health Goals (PHGs) report was completed to comply with the California Health and Safety Code (Health and Safety Code). Approval of the recommendation will fulfill the requirements of the Health and Safety Code, and no further actions are required or recommended at this time. The San José Municipal Water System (SJMWS) water supply within all service areas continues to meet federal and state drinking water standards.

BACKGROUND

The Health and Safety Code, Section 116470[1], requires that all California water retailers who provide more than 10,000 service connections prepare a report every three years informing consumers of water quality constituents that exceeded state-adopted PHGs.

[1] *Chapter 4 of the H&SC beginning with Section 116450 and including Section 116470 is known as the "California Safe Drinking Water Act."*

PHGs are non-enforceable water quality goals established by the California Office of Environmental Health Hazard Assessment and are based solely on public health risk considerations. Where there is no PHGs for a specific contaminant, retailers are required to use Maximum Contaminant Level Goals (MCLGs), which are established by the U.S. Environmental Protection Agency for reporting purposes.

In setting the PHGs/MCLGs, the California Office of Environmental Health Hazard Assessment and the U.S. Environmental Protection Agency do not take into account any of the practical risk-management factors which are considered by the U.S. Environmental Protection Agency and the State Water Resources Control Board when setting enforceable drinking water standards such as Maximum Contaminant Levels (MCLs). MCLs are the highest level of a contaminant that is allowed in drinking water. When setting MCLs, the U.S. Environmental Protection Agency and the State Water Resources Control Board consider factors such as analytical detection capability, available treatment technologies, benefits, and costs. PHGs/MCLGs are typically set at values lower than the corresponding MCLs.

The Health and Safety Code also requires that public water systems hold a public hearing on the report, which may be done as part of a regularly scheduled meeting. The PHGs report is now being presented to City Council to satisfy the public hearing requirements and to obtain City Council approval of the report before submitting to the State Water Resources Control Board.

ANALYSIS

Since 1998, SJMWS has prepared a PHGs report (Attachment) every three years in compliance with Health and Safety Code requirements. The report presents an analysis of data that has been collected over the past three years. This 2025 report covers data collected from 2022 through 2024 in the Evergreen, Edenvale, and Coyote Valley service areas. Since the North San José/Alviso service area has less than 10,000 service connections and is individually permitted by the state, a PHGs report is not required for this service area. SJMWS reports that at this time its water supply meets all primary drinking water standards set by the state and federal governments to protect public health.

The PHGs report satisfies the Health and Safety Code requirements by identifying the contaminants detected in the local water supply in amounts that exceeded the PHGs or MCLGs during the past three years, and presenting the following information for each:

- Numerical public health risk associated with the maximum contaminant level and the PHGs;
- Public health risk categories and definitions of these categories;
- The best available technology to remove or reduce the concentration of the identified contaminant, if any; and

- Recommended action for reduction of the contaminant and the basis for that decision.

Six contaminants were detected at levels above the applicable PHGs/MCLGs between 2022 and 2024: bromate, hexavalent chromium, perfluorooctanoic acid, perfluorooctanesulfonic acid, total coliform, and uranium.

Hexavalent chromium, perfluorooctanoic acid, and perfluorooctanesulfonic acid are new PHG requirements since the last completed PHGs report, and total coliform was reintroduced after being removed from the previous report's guidelines. Santa Clara Valley Water is the supplier for the treated water in which bromate and uranium levels were present at levels above the PHGs. Although no follow up action is required to address these contaminants, further information is provided in the report.

EVALUATION AND FOLLOW-UP

This report is required to be completed every three years. No additional follow up actions with City Council are expected at this time.

COORDINATION

This report was coordinated with the City Attorney's Office and the City Manager's Budget Office.

PUBLIC OUTREACH

This memorandum and the PHGs report will be posted on the City's Council Agenda website for the September 9, 2025 City Council meeting.

COMMISSION RECOMMENDATION AND INPUT

No commission recommendation or input is associated with this action.

CEQA

Not a Project, File No. PP17-009, Staff Reports, Assessments, Annual Reports, and Informational Memos that involve no approvals of any City action.

PUBLIC SUBSIDY REPORTING

This item does not include a public subsidy as defined in section 53083 or 53083.1 of the California Government Code or the City's Open Government Resolution.

/s/
Jeff Provenzano
Director, Environmental Services Department

For questions, please contact Nicole Harvie, Principal Engineer, Environmental Services Department, at nicole.harvie@sanjoseca.gov or (408) 277-3671.

ATTACHMENT: 2025 Public Health Goals Report on Water Quality

Attachment

PUBLIC HEALTH GOALS
REPORT ON WATER QUALITY

CITY OF SAN JOSE
MUNICIPAL WATER SYSTEM
(EVERGREEN, EDENVALE, AND COYOTE)
System No. 4310020

JUNE 2025

City of San José
Environmental Services Department

SAN JOSE MUNICIPAL WATER SYSTEM
PUBLIC HEALTH GOALS REPORT ON WATER QUALITY

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SECTION 1: BACKGROUND INFORMATION

WHAT ARE PUBLIC HEALTH GOALS (PHGS)?

PHGs are water quality goals established by the California Office of Environmental Health Hazard Assessment (OEHHA) and are based solely on public health risk considerations. In setting the PHGs, OEHHA does not take into account any of the practical risk-management factors which are considered by the United States Environmental Protection Agency (USEPA) and the State Water Resources Control Board (SWRCB) when setting drinking water standards such as Maximum Contaminant Levels (MCLs), including factors such as analytical detection capability, treatment technology available, benefits and costs. PHGs are typically set at values lower than the corresponding MCLs. PHGs are non-enforceable and are not required to be met by public water systems under the California Health and Safety Code. Maximum Contaminant Level Goals (MCLGs), established by USEPA, are the federal equivalent to PHGs.

REPORTING REQUIREMENTS:

Provisions of the California Health and Safety Code §116470(b) (see Attachment 1) specify that public water systems serving more than 10,000 service connections must prepare a special report if their water quality measurements have exceeded any PHGs. Reporting must be done every three years. The law also requires that where OEHHA has not adopted a PHG for a contaminant, the water suppliers are to use the MCLGs adopted by USEPA.

The purpose of this report is to inform consumers of contaminants in San José Municipal Water System's (SJMWS) drinking water that exceeded the PHGs or MCLGs during 2022, 2023, and 2024. Included in this PHG report is the numerical public health risk associated with the Maximum Contaminant Level (MCL) and the PHG or MCLG, the category or type of risk to health that could be associated with each contaminant, the best treatment technology available that could be used to reduce the contaminant level, and an estimate of the cost to install that treatment if it is appropriate and feasible. For general information about the quality of the water delivered by SJMWS, please refer to the latest Annual Water Quality Report that was prepared in June 2025. The report can be found online at www.sjenvironment.org/waterquality.

WATER QUALITY DATA CONSIDERED:

The water quality data collected by SJMWS and by SJMWS's water suppliers between 2022 and 2024 were considered for the purpose of determining compliance with drinking water standards and PHG reporting requirements (see Attachment 2). This data was all summarized in SJMWS's Annual Water Quality Report that were made available on SJMWS's website. Postcards were mailed to all customers with a QR code to SJMWS's website and information on how to request a hard copy of the Annual Water Quality Report, if preferred.

For each regulated contaminant, SWRCB establishes Detection Limits for Purposes of Reporting (DLR). DLRs are the minimum levels at which any analytical result must be reported to SWRCB. Analytical results below the DLRs cannot be quantified with any certainty. A constituent is "detected" when measured concentrations are above the DLR. In some cases, PHGs are set below the DLR.

GUIDELINES FOLLOWED:

The Association of California Water Agencies (ACWA) formed a workgroup which prepared guidelines for water utilities to use in preparing these PHG reports. ACWA guidelines were used in the preparation of this report. No formal guidance was available from state regulatory agencies.

BEST AVAILABLE TREATMENT TECHNOLOGY AND COST ESTIMATES:

Both USEPA and SWRCB adopted Best Available Technologies (BATs), which are the best known methods of reducing contaminant levels to the MCL. However, since many PHGs and MCLGs are set much lower than the MCL, it is not always possible or feasible to determine what treatment is needed to further reduce a contaminant to or below the PHG or MCLG. Where the MCLG or PHG is set at zero, there may not be commercially available technology available to reach that level. Estimating the costs to reduce a contaminant to zero is difficult, if not impossible because it is not possible to verify by analytical means that the level has been lowered to zero. In some cases, installing treatment to try and further reduce very low levels of one contaminant may have adverse effects on other aspects of water quality.

SECTION 2: CONTAMINANTS DETECTED THAT EXCEED PHGS OR MCLGS

The following is a discussion of the constituents that were detected in one or more of our drinking water sources at levels above the PHG, or if no PHG, above the MCLG. The two contaminants that were detected at levels above the applicable PHGs or MCLGs between 2022 and 2024 are:

Table 1: Constituents Detected Above PHG or MCLG (2022-2024)

Contaminant	Unit	CA MCL	DLR	PHG	MCLG	SJMWS Levels
Bromate*	ug/L	10	1	0.1	0	ND – 5.6
Hexavalent Chromium	ug/L	10	0.1	0.02	0	3.1 – 7.4
Perfluorooctanoic acid (PFOA)	ng/L	4**	--	0.007	0	0.45 – 0.99
Perfluorooctanesulfonic acid (PFOS)	ng/L	4**	--	1	0	0.85 – 1.5
Total Coliform	P/A	TT	n/a	n/a	0	0 – 2.8%***
Uranium*	pCi/L	20	1	0.43	0	ND – 1.3

* Valley Water treated surface water data
** Federal MCL, no CA MCL established at this time
*** This is the maximum monthly percentage of total coliform positive results
ug/L = micrograms per liter
ng/L = nanograms per liter
ND = Not Detected
P/A = Present/Absent
pCi/L = picocuries per liter
TT = Treatment Technique

A. BROMATE

Bromate is not commonly found in water, but it can be formed as a byproduct of ozonation disinfection of drinking water, or as a byproduct from treatment of water with concentrated hypochlorite. It is formed when naturally occurring bromide reacts with ozone during the disinfection process. SJMWS purchases treated surface water from Valley Water and delivers it to its Evergreen customers. Since 2006, Valley Water has used ozone as the primary disinfectant. Ozone disinfection is highly effective at inactivating microbial contamination and creates fewer disinfection by-products than chlorine.

The MCL for bromate is 10 ug/L, with a PHG of 0.1 ug/L. The DLR for bromate is 1 ug/L, and at the present time there are no laboratory methods available that can reliably measure bromate to levels as low as the PHG.

SJMWS Results

The reported bromate data found in Table 1 is from the 2022 water quality data from Valley Water's two water treatment plants that serve the Evergreen service area. Valley Water had detected levels of bromate up to 5.6 ug/L.

Health Risk Category and Level

The category of health risk for bromate is carcinogenicity as it is capable of producing cancer. OEHHA has determined that the numerical health risk associated with concentrations at the PHG is equivalent to one excess case of cancer in 1,000,000 people.

Best Available Technology

The BAT for bromate reduction includes:

- Maintain watershed protection
- Optimize ozone dosage control at the water treatment plant
- Reverse osmosis (RO)

RO treatment reduces the naturally-occurring bromide in source water by reducing the natural organic matter in water. When this is reduced, the demand for ozone decreases, thereby reducing bromate formation. Because the DLR for bromate (1 ug/L) is greater than the PHG (0.1 ug/L), it would be difficult to assess the effectiveness of RO treatment on reducing bromate below the PHG level. SJMWS does not own or operate a water treatment facility and therefore cannot provide an exact cost estimate to treat bromate.

Recommendation

Valley Water staff monitors its raw and treated water supply and continues to optimize treatment for disinfection byproduct control. Detected bromate levels are well below the state and federal MCL. However, if an MCL violation occurs, SJMWS will coordinate with Valley Water and the SWRCB to identify solutions for removing or reducing bromate in the water. No further action is proposed at this time.

B. HEXAVALENT CHROMIUM [CR(VI)]

Chromium is a naturally occurring inorganic element that is used in many industrial processes. For decades, both the USEPA and California have enforced limits for total chromium, which includes trivalent, hexavalent, and other forms of the element. In 2001, California rescinded its PHG for total chromium (25 parts per billions [ug/L]). In 2011, California established a PHG for Cr(VI) of 0.02 ug/L. In 2014, California published the first enforceable Cr(VI) standard in the nation: an MCL of 10 ug/L, with a DLR of 1 ug/L. The 2014 MCL was invalidated in 2017 as the regulation failed to properly consider the economic feasibility of complying with the MCL. In 2024, the MCL was established at 10 ug/L, with a DLR of 0.1 ug/L. The PHG is one-five hundredth of the MCL.

The USEPA included Cr(VI) in the third round of monitoring under its Unregulated Contaminants Monitoring Rule, which required public water systems serving over 10,000 people to monitor Cr(VI) for one year between 2013 and 2015. The USEPA is also working to issue its final human health risk assessment for Cr(VI), which might lead to the adoption of federal standards for Cr(VI). However, as of this writing, the USEPA has no standards for Cr(VI).

SJMWS Results

SJMWS detected Cr(VI) in 2022 and 2023. In 2022, Cr(VI) was detected at groundwater sources in the Evergreen service area at a detected concentration of 4.2 ug/L, which is below the MCL of 10 ug/L but above the PHG of 0.02 ug/L.

In 2023, Cr(VI) was detected as part of monitoring of groundwater sources in the Evergreen, Edenvale, and Coyote service areas. Detected levels of Cr(VI) were measured at concentrations from 3.1 to 7.4 ug/L, which is below the MCL of 10 ug/L but above the PHG of 0.02 ug/L.

Health Risk Category and Level

Cr(VI) can occur naturally but can also enter drinking water sources by leaks from industrial plants' hazardous waste sites. The OEHHA characterizes Cr(VI) as carcinogenic. However, most studies of chromium toxicity relate to inhaling airborne Cr(VI) in the workplace rather than ingesting it in drinking water. Exposure to Cr(VI) from breathing dust or fumes is considered much more dangerous than exposure from drinking water. It is estimated that exposure to airborne Cr(VI) is 1000 times more potent than exposure from drinking water.

The OEHHA calculated the PHG based on the carcinogenic risk. Non-carcinogenic risks have also been associated with inhalation and/or oral ingestion of Cr(VI), including reproductive toxicity (developmental, male reproductive, and female reproductive toxicity), liver toxicity (mild chronic inflammation, fatty changes), and toxicity of blood-forming tissues.

The OEHHA calculated health-protective levels based on carcinogenic and non-carcinogenic effects. The health-protective level for carcinogenic effects is one-hundredth of the level based on non-carcinogenic effects; thus, the carcinogenic risk was used to calculate the PHG. The cancer risk associated with lifetime consumption of water at the PHG is one in one million excess cancer cases. Cancer risk at the MCL is five per ten thousand excess cancer cases.

Best Available Technology

The federal and state approved technologies for removing chromium from drinking water include coagulation/filtration, anion exchange, reverse osmosis, and lime softening.

As a result of research completed over the past decade by multiple water agencies and the state of California, three Cr(VI) technologies have emerged as leading candidates with respect to feasibility and cost; these include weak base anion exchange, strong base anion exchange, and reduction with ferrous iron/coagulation/filtration.

SJMWS does not own or operate a water treatment facility and therefore cannot provide an exact cost estimate to treat Cr(VI).

Recommendations

SJMWS will continue to monitor and protect water sources, as required by state and federal regulations. In the event that Cr(VI) levels exceed the MCL, SJMWS will coordinate with the SWRCB to identify solutions for removing or reducing Cr(VI) levels in the water. No further action is proposed at this time.

C. PERFLUOROOCTANOIC ACID (PFOA)

Perfluorooctanoic acid (PFOA) was widely used in industrial applications and consumer products, notably, in nonstick cookware. The manufacture of PFOA was phased out in the US following concerns about its extreme persistence in the environment and detection in virtually all human blood serum samples. Although levels in the environment have declined from their peak around the year 2000, PFOA continues to be present in the environment and is found in California drinking water.

SJMWS Results

SJMWS detected PFOA in 2023 and 2024. In 2023, PFOA was detected when sampling groundwater sources in the Evergreen service area at a detected concentration of 0.99 ng/L, which is below the federal MCL of 4 ng/L, but above the PHG of 0.007 ng/L. In 2024, PFOA was detected when sampling groundwater sources in the Evergreen service area at a detected concentration range of 0.45 to 0.54 ng/L, which is below the federal MCL of 4 ng/L, but above the PHG of 0.007 ng/L.

Health Risk Category and Level

The category of health risk for PFOA is carcinogenicity as it is capable of causing cancer. OEHHA has determined that the numerical health risk associated with concentrations at the PHG is equivalent to one excess case of cancer in 1,000,000 people.

Best Available Technology

As a result of research completed over the past decade by multiple water agencies and the state of California, granular activated carbon, nanofiltration, reverse osmosis, and anion exchange technologies have emerged as the leading candidates with respect to feasibility and cost.

SJMWS does not own or operate a water treatment facility and therefore cannot provide an exact cost estimate to treat PFOA.

D. PERFLUOROOCTANESULFONIC ACID (PFOS)

Perfluorooctanesulfonic acid (PFOS) was widely used in industrial applications and consumer products, notably, in stain and water-repellant fabrics and in fire-fighting foams. Just as with PFOA, the manufacture of PFOS was phased out in the US following concerns about its extreme persistence in the environment and detection in virtually all human blood serum samples. Although levels in the environment have declined from their peak around the year 2000, PFOS continues to be present in the environment and is found in California drinking water.

SJMWS Results

SJMWS detected PFOS in 2024. In 2024, PFOS was detected when sampling groundwater sources in the Evergreen service area at a detected concentration range of 0.85 to 1.5 ng/L, which is below the federal MCL of 4 ng/L, but with some samples above the PHG of 1 ng/L.

Health Risk Category and Level

The category of health risk for PFOS is carcinogenicity as it is capable of causing cancer. OEHHA has determined that the numerical health risk associated with concentrations at the PHG is equivalent to one excess case of cancer in 1,000,000 people.

Best Available Technology

As a result of research completed over the past decade by multiple water agencies and the state of California, granular activated carbon, nanofiltration, reverse osmosis, and anion exchange technologies have emerged as the leading candidates with respect to feasibility and cost.

SJMWS does not own or operate a water treatment facility and therefore cannot provide an exact cost estimate to treat PFOS.

E. COLIFORM BACTERIA

Coliform bacteria are an indicator organism that are common in nature and are not generally considered harmful. They are used as an indicator because of the ease of monitoring and analysis. In July 2021, the California Revised Total Coliform Rule became effective. The revisions included the new Coliform Treatment Technique requirement replacing the Total Coliform MCL, and a new E. coli MCL regulatory limit. The purpose for the revisions was to provide the public with increased protection against microbial pathogens in drinking water served by public water systems.

The reason for the coliform drinking water standard is to minimize the possibility that the water contains pathogens, which are organisms that cause waterborne disease. If a sample is found to contain coliform bacteria, it indicates a potential problem that needs to be investigated and follow up sampling and investigation is required. It is not unusual for a system to detect occasional presence of coliform bacteria. It is difficult, if not impossible, to ensure that a system will never get a detection. Additionally, due to the sensitive nature of the sampling and laboratory analysis methods, some detections may be caused by sample contamination.

Because coliform is only an indicator of the potential presence of pathogens, it is not possible to state a specific numerical health risk or public health risk category.

SJMWS Results

Between 2022 and 2024, SJMWS collected between 100 and 125 samples each month for coliform analysis. Coliform bacteria exceeded the MCLG of zero in 3 of the 36 months. Results for the three years covered by this report (2022-2024) are summarized by year below:

- **2022**: There was no total coliform detected in any of the samples in 2022

- **2023**: Two months with total coliform positive samples; the highest monthly percentage of positives was 0.97%

- **2024**: One month with total coliform positive samples; the monthly percentage of positives was 2.8%

Health Risk Category and Level

Because coliform is only an indicator organism for pathogens in drinking water, its numerical health risk cannot be determined. While MCLGs are normally set at a level where no known or anticipated adverse effects on health would occur, the USEPA has indicated that it is not possible to do so with coliform, since the actual pathogens are not being measured.

Best Available Technology

As part of routine operations, SJMWS takes steps described by SWRCB as "best available technology" for coliform bacteria in Section 64447, Title 22, CCR, including protection of wells from contamination and proper maintenance of the distribution system. Some steps are implemented from the wholesale agencies who supply water to SJMWS, such as the filtration and/or disinfection of surface water supplies. Some steps are implemented in a modified way following coordination with and approval by SWRCB, such as biannual temporary disinfection of groundwater supplies in lieu of constant disinfection.
Other equally important measures that have been implemented to protect drinking water include an effective cross-connection control program, an effective monitoring and surveillance program, flushing of mains and hydrants, and maintaining positive pressure in the distribution system.

There is one method that could potentially further reduce the presence of total coliform, which is to increase the amount of disinfectant residual in the distribution system and/or the regularity of disinfection of groundwater supplies. The tradeoffs include increased chemical usage and storage, a change in the taste and odor of the drinking water, and increased potential for the presence of cancer-causing disinfection byproducts. Additionally, there are limits for the maximum amount of disinfectant residual allowed in the distribution system as set by SWRCB and USEPA.

Recommendations

SWRCB and USEPA set primary drinking water standards to protect public health, which are met by SJMWS. There is no known treatment technology that can be added which could ensure complete absence of coliform bacteria in all water samples; therefore, the costs associated with incorporating any additional technology may be better utilized to provide greater public health protection benefits if spent in other aspects, such as operations, maintenance, and water quality monitoring programs. SJMWS will continue to coordinate with SWRCB to identify any additional measures that will improve operations and water quality in the distribution system. No further action is proposed at this time.

F. URANIUM

The radiological contaminant uranium is naturally occurring and was detected in wholesale treated water from Valley Water, which is the primary water supply for the Evergreen service area.

The PHG for uranium is 0.43 pCi/L based on carcinogenicity. The state MCL for uranium is 20 pCi/L, which is approximately equal to 30 ug/L. Established federal limits for uranium include an MCL of 30 ug/L and an MCLG of 0 ug/L.

SJMWS Results

The reported uranium data found in Table 1 is from the 2022 water quality data from Valley Water's two water treatment plants that serve the Evergreen service area. Valley Water had detected levels of uranium up to 1.3 pCi/L.

Health Risk Category and Level

The category of health risk for uranium is carcinogenicity as it is capable of producing cancer. OEHHA has determined the theoretical health risk associated with the California PHG is 1 excess case of cancer in a million people. California Environmental Protection Agency has determined the risk associated with the California MCL is 5 excess cases of cancer in 100,000 people exposed over a 70-year lifetime.

Best Available Technology

The BAT for uranium reduction includes maintaining watershed protection and reverse osmosis (RO). SJMWS does not own or operate a water treatment facility and therefore cannot provide an exact cost estimate to treat uranium.

Recommendation

Valley Water staff monitors its raw and treated water supply and continues to optimize treatment for uranium. Detected uranium levels are well below the state and federal MCL. However, if an MCL violation occurs, SJMWS will coordinate with Valley Water and the SWRCB to identify solutions for removing or reducing bromate in the water. No further action is proposed at this time.

For more information on health risks: The adverse health effects for each chemical with a PHG are summarized in a PHG technical support document available on the OEHHA web site (http://www.oehha.ca.gov). Also, technical fact sheets on most of the chemicals having federal MCLs can be found at http://www.epa.gov/your-drinking-water/table-regulated-drinking-water-contaminants.

ATTACHMENT 1
EXERPT FROM CALIFORNIA HEALTH & SAFETY CODE SECTION 116470

(b) On or before July 1, 1998, and every three years thereafter, public water systems serving more than 10,000 service connections that detect one or more contaminants in drinking water that exceed the applicable public health goal, shall prepare a brief written report in plain language that does all of the following:

(1) Identifies each contaminant detected in drinking water that exceeds the applicable public health goal.

(2) Discloses the numerical public health risk, determined by the office, associated with the maximum contaminant level for each contaminant identified in paragraph (1) and the numerical public health risk determined by the office associated with the public health goal for that contaminant.

(3) Identifies the category of risk to public health, including, but not limited to, carcinogenic, mutagenic, teratogenic, and acute toxicity, associated with exposure to the contaminant in drinking water, and includes a brief plainly worded description of these terms.

(4) Describes the best available technology, if any is then available on a commercial basis, to remove the contaminant or reduce the concentration of the contaminant. The public water system may, solely at its own discretion, briefly describe actions that have been taken on its own, or by other entities, to prevent the introduction of the contaminant into drinking water supplies.

(5) Estimates the aggregate cost and the cost per customer of utilizing the technology described in paragraph (4), if any, to reduce the concentration of that contaminant in drinking water to a level at or below the public health goal.

(6) Briefly describes what action, if any, the local water purveyor intends to take to reduce the concentration of the contaminant in public drinking water supplies and the basis for that decision.

…

(f) Pending adoption of a public health goal by the Office of Environmental Health hazard Assessment pursuant to subdivision (c) of Section 116365, and in lieu thereof, public water systems shall use the national maximum contaminant level goal adopted by the United States Environmental Protection Agency for the corresponding contaminant for purposes of complying with the notice and hearing requirements of this section.

ATTACHMENT 2

CALIFORNIA MCLS & PHGS AND FEDERAL MCLGS

PARAMETERS/CONTAMINANTS	Units	State MCL	DLR	PHG or (MCLG)	PHG EXCEEDED?
INORGANICS					
ALUMINUM	mg/L	1	0.05	0.6	NO
ANTIMONY	mg/L	0.006	0.006	0.02	NO
ARSENIC	ug/L	10	2	0.004	NO
ASBESTOS	million fibers/L	7	0.2	7	NO
BARIUM	mg/L	1	0.1	2	NO
BERYLLIUM	mg/L	0.004	0.001	0.001	NO
CADMIUM	mg/L	0.005	0.001	0.00004	NO
CHROMIUM (HEXAVALENT)	mg/L	0.01	0.0001	0.00002	YES
COPPER (at-the-tap; 90th percentile)	mg/L	1.3	0.05	0.3	NO
CYANIDE	mg/L	0.15	0.1	0.15	NO
FLUORIDE	mg/L	2	0.1	1	NO
LEAD (at-the-tap; 90th percentile)	mg/L	0.015	0.005	0.0002	NO
MERCURY	mg/L	0.002	0.001	0.0012	NO
NICKEL	mg/L	0.1	0.01	0.012	NO
NITRATE [as N03]	mg/L	45	2	45	NO
NITRATE + NITRITE [as N]	mg/L	10	--	10	NO
NITRITE [as N]	mg/L	1	0.4	1	NO
PERCHLORATE	mg/L	0.006	0.004	0.006	NO
SELENIUM	mg/L	0.05	0.005	(0.05)	NO
THALLIUM	mg/L	0.002	0.001	0.0001	NO
ORGANIC CHEMICALS					
ALACHLOR	mg/L	0.002	0.001	0.004	NO
ATRAZINE	mg/L	0.001	0.0005	0.00015	NO
BENTAZON	mg/L	0.018	0.002	0.2	NO
BENZO (a) PYRENE	mg/L	0.0002	0.0001	0.000004	NO
BROMATE	ug/L	10	1	0.1	YES
CARBOFURAN	mg/L	0.018	0.005	0.0017	NO
CHLORDANE	mg/L	0.0001	0.0001	0.00003	NO
CHLORITE	ug/L	1	0.02	0.05	NO
2,4-DICHLOROPHENOXYACETIC ACID	mg/L	0.07	0.01	0.02	NO
DALAPON	mg/L	0.2	0.01	0.79	NO
DIBROMOCHLOROPROPANE [DBCP]	mg/L	0.0002	0.00001	0.0000017	NO
DI (2-ETHYLHEXYL) ADIPATE	mg/L	0.4	0.005	0.2	NO
DI (2-ETHYLHEXYL) PHTHALATE	mg/L	0.004	0.003	0.012	NO
DINOSEB	mg/L	0.007	0.002	0.014	NO
DIOXIN [2,3,7,8 - TCDD]	mg/L	3x10-8	5x10-9	(0)	NO
DIQUAT	mg/L	0.02	0.004	0.015	NO
ENDOTHALL	mg/L	0.1	0.045	0.58	NO
ENDRIN	mg/L	0.002	0.0001	0.0018	NO
ETHYLENE DIBROMIDE [EDB]	mg/L	0.00005	0.00002	0.00001	NO
GLYPHOSATE	mg/L	0.7	0.025	0.9	NO
HEPTACHLOR	mg/L	0.00001	0.00001	0.000008	NO
HEPTACHLOR EPOXIDE	mg/L	0.00001	0.00001	0.000006	NO
HEXACHLOROBENZENE	mg/L	0.001	0.0005	0.00003	NO
HEXACHLOROCYCLOPENTADIENE	mg/L	0.05	0.001	0.05	NO
LINDANE	mg/L	0.0002	0.0002	0.000032	NO
METHOXYCHLOR	mg/L	0.03	0.01	0.03	NO
MOLINATE	mg/L	0.02	0.002	0.001	NO
OXAMYL	mg/L	0.05	0.02	0.026	NO

PARAMETERS/CONTAMINANTS	Units	State MCL	DLR	PHG or (MCLG)	PHG EXCEEDED?
PENTACHLOROPHENOL	mg/L	0.001	0.0002	0.0003	NO
PERFLUOROOCTANESULFONIC ACID (PFOS)	mg/L	NA	--	1x10^-6	YES
PERFLUOROOCTANOIC ACID (PFOA)	mg/L	NA	--	7x10^-9	YES
PICLORAM	mg/L	0.5	0.001	0.5	NO
POLYCHLORINATED BIPHENYLS [PCBs]	mg/L	0.0005	0.0005	0.00009	NO
SILVEX [2,4,5-TP]	mg/L	0.05	0.001	0.025	NO
SIMAZINE	mg/L	0.004	0.004	0.004	NO
THIOBENCARB	mg/L	0.07	0.001	0.07	NO
TOXAPHENE	mg/L	0.003	0.001	0.00003	NO
BENZENE	mg/L	0.001	0.0005	0.00015	NO
CARBON TETRACHLORIDE	mg/L	0.0005	0.0005	0.0001	NO
1,2-DICHLOROBENZENE [ORTHO]	mg/L	0.6	0.0005	0.6	NO
1,4-DICHLOROBENZENE [PARA]	mg/L	0.005	0.0005	0.006	NO
1,1-DICHLOROETHANE [1,1-DCA]	mg/L	0.005	0.0005	0.003	NO
1,2-DICHLOROETHANE [1,2-DCA]	mg/L	0.0005	0.0005	0.0004	NO
1,1-DICHLOROETHENE [1,1-DCE]	mg/L	0.006	0.0005	0.01	NO
CIS-1,2-DICHLOROETHYLENE	mg/L	0.006	0.0005	0.1	NO
TRANS-1,2-DICHLOROETHYLENE	mg/L	0.01	0.0005	0.06	NO
DICHLOROMETHANE (METHYLENE CHLORIDE)	mg/L	0.005	0.0005	0.004	NO
1,2-DICHLOROPROPANE	mg/L	0.005	0.0005	0.0005	NO
1,3-DICHLOROPROPENE	mg/L	0.0005	0.0005	0.0002	NO
ETHYLBENZENE	mg/L	0.3	0.0005	0.3	NO
METHYL TERT BUTYL ETHER (MTBE)	mg/l	0.013	0.003	0.013	NO
MONOCHLOROBENZENE	mg/L	0.07	0.0005	0.2	NO
STYRENE	mg/L	0.1	0.0005	(0.1)	NO
1,1,2,2-TETRACHLOROETHANE	mg/L	0.001	0.0005	0.0001	NO
TETRACHLOROETHYLENE [PCE]	mg/L	0.005	0.0005	0.00006	NO
TOLUENE	mg/L	0.15	0.0005	0.15	NO
1,2,4-TRICHLOROBENZENE	mg/L	0.005	0.0005	0.005	NO
1,1,1-TRICHLOROETHANE [1,1,1-TCA]	mg/L	0.2	0.0005	1	NO
1,1,2-TRICHLOROETHANE [1,1,2-TCA]	mg/L	0.005	0.0005	0.0003	NO
TRICHLOROETHYLENE [TCE]	mg/L	0.005	0.0005	0.0017	NO
TRICHLOROFLUOROMETHANE (FREON 11)	mg/L	0.15	0.005	0.7	NO
TRICHLOROTRIFUOROETHANE (FREON 113)	mg/L	1.2	0.01	4	NO
VINYL CHLORIDE	mg/L	0.0005	0.0005	0.00005	NO
XYLENES [SUM OF ISOMERS]	mg/L	1.75	0.0005	1.8	NO
MICROBIOLOGICAL					
COLIFORM		TT	n/a	(zero)	YES
CRYPTOSPORIDIUM		TT		(zero)	NO
GIARDIA LAMBLIA		TT		(zero)	NO
LEGIONELLA		TT		(zero)	NO
VIRUSES		TT		(zero)	NO
RADIOLOGICAL					
ALPHA ACTIVITY, GROSS	pCi/L	15	3	(zero)	NO
BETA ACTIVITY, GROSS	pCi/L	4 mrem/yr	4	(zero)	NO
RADIUM 226	pCi/L	--	1	0.05	NO
RADIUM 228	pCi/L	--	1	0.019	NO
RADIUM 226 + RADIUM 228	pCi/L	5	--	--	NO
STRONTIUM 90	pCi/L	8	2	0.35	NO
TRITIUM	pCi/L	20000	1000	400	NO
URANIUM	pCi/L	20	1	0.43	YES

Abbreviations: MCL = Maximum Contaminant Level; MCLG = Maximum Contaminant Level Goal; PHG = Public Health Goal; DLR = Detection Limit for purposes of Reporting, set by SWRCB; TT = Treatment Technique