

Massachusetts Department of Environmental Protection Bureau of Water Resources - Drinking Water Program

Seasonal Start-up Procedure and Certification for Non-Community Public Water Systems

City/Town	
2010	
PWS Name	
PWS ID#	
Date PWS will open for season	_

Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.







Instructions

A non-community water system that is not operated as a public water system on a year-round basis and starts up and shuts down at the beginning and end of each operating season must follow this state-approved start-up procedure prior to placing all or any part of the system back into service.

Per the requirements of the Revised Total Coliform Rule (RTCR) seasonal PWS must do the following prior to serving water to the public each year.

- 1. Complete the state-approved start-up procedure listed below. Items listed below in **bold** are the minimum MassDEP-required start-up activities for all systems. Items not bolded are recommended where applicable.
- 2. Collect a round of special bacteria samples and receive confirmation from the laboratory that the samples are free of coliform bacteria.
- 3. Once the start-up procedure is complete, indicate all start-up activities performed with dates on the checklist below (Section A.).
- 4. Complete the start-up summary (Section B.).
- 5. Complete, sign, scan, or save as PDF, and return this form at least seven days prior to serving water to the public by email attachment to program.director-dwp@mass.gov. Include in the Subject Line: "(PWSID) - Seasonal certification" and name the document "(PWS ID)-(PWS name)- Seasonal Start Up-Cert-(year)". In addition, submit a copy of this completed certification form to the PWS's MassDEP Drinking Water Program regional office. If you are only able to provide mailed certification, it must be postmarked at least seven days prior to serving water to the public.

NOTE: Placing the system back into service is not permitted until this seasonal start-up procedure is completed and clean bacteria results have been confirmed with the laboratory. Failure to perform the minimum start-up activities and/or failure to submit this certification to MassDEP prior to serving water to the public is a violation subject to enforcement and public notification requirements.

Notified primary and/or contract operator of date PWS will begin serving water to the public.		
Inspected all water system components including: source(s), treatment components, distribution lines and storage tanks. Addressed any issues found during this inspection.		
Activated source(s) and opened hydrant(s) and/or all faucets to flush water through entire distribution system. Date:		
Collected coliform samples which were taken in accordance with the coliform sampling plan on file, including any additional special samples representing the re-activated portions of the system.* Date collected: Number of Samples Taken:		
☐ I have received confirmation from the laboratory that the special samples were negative for total coliform. (Results must be submitted to MassDEP through eDEP).		

*Coliform samples taken prior to serving water to the public are considered special purpose samples and do not count toward monthly compliance monitoring, which must still be conducted after the PWS starts serving water to the public. If there is no routine site on the sampling plan representing the re-activated portion of the system, ensure additional special samples are collected at start-up representing the re-activated area(s).

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A. Sta	rt-up Activities (to be done as ap	pplicable) (cont.)	
☐ Insta	lled chlorination equipment and ensured that	it is operational (if chlorinated system).	
Flush		water in the distribution system for at least 24 hours. nated water. Systems that do not routinely chlorinate must iny coliform sample collection. Date:	
☐ Disin	fected atmospheric storage tank(s) (if present	t) and thoroughly flushed. Date:	
Re-ir	nstalled water meter(s) (if removed during shu	ut-down of system).	
	Re-installed all backflow preventers including hose bib vacuum breakers on all threaded taps throughout the distribution system (<i>if removed during shut-down of system</i>). Tested all testable backflow preventers.		
Revi	ewed and addressed all non-compliance issue	es from prior years.	
B. Sta	art-up Summary (required for all	systems)	
	rces (include source ID# (i.e.01G)) and portio ize any additional start-up activities. Use add	ons of the PWS that were returned to service and ditional sheets if necessary.	
C. PW	S Certification - To be completed b	by PWS owner, operator, or responsible party	
I certify u	nder penalty of law that I am duly authorized to	complete and submit this form on behalf of the public water ed herein is true, accurate and complete to the best of my	
Print Nar	ne	Title	
Signature		Date	
Phone #		Email	
Mass	se return this form by email to <u>program</u> DEP Drinking Water Program regiona rn Region, Springfield	m.director-dwp@mass.gov AND by mail to your al office listed below: Central Region, Worcester	
436 Dy Spring	wight Street field, MA 01103 elephone: 413-784-1100	8 New Bond Street Worcester, Massachusetts 01606 Bacteria Hotline: 508-849-4001	
	east Region, Woburn esidential Way	Southeast Region, Lakeville and Cape Cod 20 Riverside Drive	

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