

We did not open in April.

Opening May 8

IN2910970

Stevensons Point Campground

Date (month, day, year)

5-4-2020

5-8-2020

IDEM

Seasonal System Start-up Requirements

State Form 55927 (R2 / 9-16)

we plan to open soon

This checklist must be completed as you start up your system. It will aid in preventing contamination from entering your water system and will help you identify problems with your system. You must complete the following tasks (if applicable), check completion of each task, and mail, fax, or e-mail a signed copy with a copy of the special purpose sample result to the IDEM Drinking Water Branch. Make and keep a copy for your records.

RECEIVED
MAY 11 2020
By _____

Review Sampling Requirements Done?

- Review sampling schedule available at myweb.in.gov/IDEM/DWW/ or you can call 1(800)451-6027 ext. 47430 Yes
- Make arrangements for sample collection analysis with a certified lab (including SSLAP) Yes
- Review your site sampling plan and make sure it is up to date Yes

Well(s) Done?

- Well cap is tight and secure Yes
- Pump house is locked and secure Yes n/a
- Well casing is structurally sound and there is no visible damage Yes
- Vent screen is in place and downturned Yes n/a
- Rodents and insects are kept out of any enclosure around the well (e.g. keep area mowed) Yes
- The source or well sample tap* does not leak and flows freely when opened
*This is typically a spigot, hose bib, or sample tap located after the well but before the storage tank or any water treatment device Yes
- Contaminant sources such as chemicals, livestock, and fuel are kept at least 100 feet from the well Yes
- Check for evidence of flooding or standing water near the well Yes

Water Treatment Equipment Done?

- All components are operating properly and free of corrosion or damage Yes n/a
- ANSI- or NSF-approved water treatment chemicals are on hand Yes n/a

Storage Tanks Done?

- All valves, gauges, and controls are working properly Yes n/a

Storage Tanks CONTINUED Date: _____

Pressure is being maintained and the pump is cycling normally (once the system is pressurized) Yes No

Tanks are sealed, not leaking, and in working order Yes No

For a non-pressurized tank, the vent screen is in place and downturned Yes n/a

Distribution System Date: _____

All accessible lines and equipment are free of corrosion, damage, or leaks Yes No

All valves open and close freely Yes n/a

Outdoor spigots or yard hydrants have vacuum breakers or backflow preventers Yes n/a

All testable backflow preventers have been tested by a certified backflow tester in the last twelve (12) months. Yes n/a

Activate and Pressurize Date: _____

Well and pump are operating correctly Yes No

System is fully pressurized (at least 20 psi) and not leaking Yes No

Water treatment equipment is operating correctly Yes n/a

Disinfect and Flush System Date: _____

System was disinfected Yes No

System was flushed Yes No

Collected a satisfactory special purpose total coliform sample from farthest point in the distribution system. Submit results of sample to IDEM. 05-04-2020 Yes

Keep a copy of this checklist and submit the original to IDEM. *May 5*

Date system opens for the season: depends on it

Comments (Attach an additional sheet if more space is needed.)
We will be testing the water this week.

I certify, under penalty of law, that this document was prepared by me, and that any deficiencies found during this seasonal start-up inspection have, to the best of my knowledge and belief, been corrected.

Sandra Ellen 5-4-2020
 Name Signature Date (month, day, year)

Did water test and it was fine. 5-8-2020

Mail, fax, or e-mail checklist and sample result to:
 Indiana Department of Environmental Management
 100 N. Senate Ave ICN 1255
 Indianapolis, IN 46204
 Fax: 317-234-7462
 Email: GeoCart@dem.in.gov

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 MAY 11 2020
 By: _____

