

III. REMEDIAL ACTIONS COMPLETED:

Please check the appropriate boxes below that best describes the school's actions taken to remediate the elevated level of lead found in the drinking water samples of this specific outlet. For multiple drinking water outlets with elevated lead levels, complete this form for **each** drinking water outlet. **Attach any additional details about Remedial Actions Completed to this form.**

Date(s) of Remediation: 5/1/2019

Check all that apply:

- ☐ Permanently closed access to outlet (e.g., physically disconnect from water supply system).
- ☐ Removed the outlet.
- ☐ Installed and maintained a point of use filter at the outlet.
- ☐ Repaired the outlet, plumbing, or service line contributing to the elevated level of lead.
- ☐ Reconfigured the outlet, plumbing, or service line contributing to the elevated level of lead.
- ☐ Replaced the outlet, plumbing, or service line contributing to the elevated level of lead.
- ☐ Installed and maintained automatic flushing of outlets after testing confirms that the lead level in the outlet after flushing is not elevated. (Removed statement about automatic flushing not being acceptable for water fountains/coolers)
- ☐ Provided bottled water that meets all National Primary Drinking Water regulations; Complete and attach a Bottle water Certification Form.
- ☐ Checked grounding wires.
Adhered signage at sink "Do Not Use for Drinking". Acceptable remediation per Maryland Department of the Environment. Art room prep / storage sinks are not meant for consumption. In general such fixtures do not comply with plumbing industry standards for lead content since they are not meant for consumption.
- ☒ Other (Describe): _____

IV. POST-REMEDATION FOLLOW-UP SAMPLE COLLECTION:

Laboratory: SECTION NOT APPLICABLE Laboratory Certification ID #: _____

Sample Type: ☐ First-draw ☐ Flushed (only if automated flushing is the means of remediation)

Follow Up Lead Result for Outlet: _____ ppb Date of sample collection: _____

Outlet Returned to Service?: ☐ Yes ☐ No Date Returned to Service: _____

Name of Person Responsible for Remediation: _____

Phone #: _____ Email: _____

V. CERTIFICATION:

I certify that (check items completed):



Remedial measures were performed at each outlet where an elevated level of lead was found.



For outlets that were not permanently disconnected or removed from service as means of remediation: After remediation, a follow-up first-draw sample (flushed sample for any outlet for which automated flushing was the means of remediation) was collected from each outlet where an elevated level of lead was found.



Outlets were only put back into service if no elevated levels of lead were found in the follow-up first-draw samples (flushed samples if automated flushing was the means of remediation).

Jeff Klenk

Name of Designated Responsible Person (Printed)

Jeffrey Klenk

Signature

410-313-6699

Phone Number

6/6/2019

Date

Environmental Safety Specialist

Title

jeffrey_klenk@hcpss.org

Email