## New Jersey Department of Environmental Protection Division of Water Supply & Geoscience

## **Water Supply Emergency Incident Report**

INSTRUCTIONS: For water supply emergencies involving loss of pressure or quality, the supplier of water shall:

- 1) within 6 hours of the occurrence notify NJDEP Hotline 1-877-927-6337 (WARN DEP) for documentation and tracking of the incident;
- 2) inform the Bureau of Water System Engineering (BWSE) at (609) 292-2957 during business hours; and
- 3) submit this completed report form to the Division's general email address at wsemergency@dep.nj.gov unless otherwise specified.

Date Of Report: 1/30/2020	Initial Report [ X ] Updated Rep	oort [ ]	
Completed by: Dean Adams			
General Information:			
System Name: Pemberton Early Childhood Education Center:	PWSID #: NJ 0329332		
NJDEP Hotline Assigned Tracking Number: called in at 2:27pm and	was not given a number		
Point of Contact: Dean Adams	Title: Facility Director		
Cell Phone: 609-217-8723	Work Phone: 609-893-8141 ext. 19	Work Phone: 609-893-8141 ext. 1972	
Fax Number: na	Email: <u>dadams@pemb.org</u>		
Incident Description:			
Date of Incident: 1/30/2020	Time of Awareness: 7am		
Incident Type: Water main break[ ] Damage due to construction[	/unknown (Specify)[ X] loose flange bolts custodian and found low suction notification	n warning illuminated on	
County(s) Impacted: None			
Municipality(s) Impacted: None			
Service Connections Impacted: NONE			
Total Population Impacted: Just PECEC school			
Water System Area Impacted: Provide northern, southern, western, a depicting the affected area should also be included. None just PECE		the incident; a map	
Is the incident thought to be intentional?		Yes[]No[X]	
If Yes, is the area of the incident now being handled as a cr	ime scene by law enforcement?	Yes[]No[X]	
If <b>Yes</b> , has the incident been reported to the Suspicious Activity call center (866-472-3365)?		Yes[]No[X]	

Incident Description (Continued):	
Are any consecutive (i.e. interconnected) water systems affected or impacted?  If <b>Yes</b> provide system name(s):	Yes[]No[X]
Are any Healthcare critical facilities or other sensitive populations affected?  If <b>Yes</b> indicate all affected: Schools[X] Daycare facilities[] Hospitals[] Surgical centers[] Endoscopy suites[] Nursing homes[] Assisted living facilities[] Dialysis centers[]	Yes [X] No []
Does the damage or loss of facilities affect critical activities for other Sectors?	Yes[]No[X]
If Yes, identify all sectors, activities, and/or entities adversely affected: Agriculture/Food[ ] Financial services[ ] Emergency services[ ] Federal/State Governance[ ] Other (specify)[ ]	Not Determined [
Is there extensive damage to a critical facility and/or is there damage to a large portion of your system's infrastructure/facilities (i.e. hurricane damage)?	Yes[]No[X]
If Yes please complete the Water Supply Damage Assessment Report (http://www.nj.gov/dep/watersupply/doc/ws-dar.docx)	
Response Actions:	
Has the appropriate water use advisory been issued?  If <b>Yes</b> , type of advisory issued: Boil Water[X] Do Not Drink[] Do Not Use[]  If <b>Yes</b> , delivery methods used (check all that apply): Telephone notification[] Reverse 911[] TV/Radio broadcasts[] Hand delivery (door-to-door)[] Sound truck[] Other (specify)[X]	Yes [X]No[]
Other notifications made:  Local police[ ] Fire[ ] Public works[ ] School districts[ ] Mayors of affected towns[ ] Local health departme  County health department(s)[ ] Offices of Emergency Management[ ] Critical/sensitive populations[ ]	nt(s)[ ]
Are provisions for alternate water supply being established?  If <b>Yes</b> check all that apply: Interconnections with other community water systems[ ] Bottled water[ ]  Water tanker[ ] Temporary overland hydrant to hydrant connections[ ] Other (specify)[ ]	Yes[]No[] N/A[X]
Recovery Status  Describe current status of repairs/replacement, etc. being implemented: (Subsequent status reports may expand on tactions implemented.) Repairs 100 % Complete	he corrective
Estimated date/time for repairs and restoration of normal service: Repairs have been made. Building was down from 6 10:30am.	5:30am until
Was disinfection, flushing and sampling of the repaired infrastructure performed in accordance with the appropriate American Water Works Association (AWWA) standards? Flushing yesWater is scheduled to be tested tomorrow.	Yes[]No[]
Attach the results of any water samples collected to verify sanitary repairs restoration of water quality- I will send to the receive the results.	e DEP once I