Drinking Water Safety Planning Template

For **Small** Supplies:
Supplying 26–100 people

Your details

Name of owner:	
Name of operator (if different to owner):	
Supply name:	
Supply location:	
Unique supply identifier:	
Emergency contact name:	
Emergency contact phone number:	
Supply type:	Population:

Drinking Water Quality Assurance Rules category: ☐ Networked supplies ☐ Self-supplied buildings

Please refer to the ***Drinking Water Safety Planning Guidance for Small Supplies – Supplying 26-100*** people as you complete this template.

Question 1: What makes up your drinking water supply?

What are the components of your drinking water supply?

Include all infrastructure and processes used to abstract, store, treat, or transmit drinking water.

A. Water sources – tick all that apply

Groundwater

- ☐ **Bore** (including well)
- ☐ **Spring**

Surface water

- ☐ **Lake** (including dam)
- ☐ **River / stream / creek**

Rainwater

- ☐ **Roof** (rainwater)

Other

- ☐ **Carted water** (e.g. from a water carrier)
- ☐ **From other drinking water supply**

Description

Include all infrastructure and processes used to abstract, store, treat or transmit drinking water

B. Treatment

- [ ] Pre-treatment (e.g., first flush diverter)
- [ ] Cartridge filtration
- [ ] UV disinfection
- [ ] Chlorination (e,g., sodium hypochlorite)
- [ ] None
- [ ] Other (please specify):

C. Distribution

- [ ] Storage/header tank
- [ ] Pumps
- [ ] Pipes
- [ ] Other (please specify):

D. Population and supply volume

1. How many consumers does this supply normally provide drinking water to?

2. What is the anticipated daily minimum and maximum (peak) volume of drinking water provided to that population?

3. Does this population increase significantly at different times of the year?

4. If **Yes** to Question 3, what is the maximum number of consumers you supply water to?

5. If **Yes** to Question 3, is your supply capable of supplying sufficient water to the maximum number of consumers?

6. If **No** to Question 5, how will you supplement your drinking water supply to ensure sufficient drinking water is supplied at all times?

Question 2: What does your supply look like?

Provide a flow diagram or schematic and photos of your supply

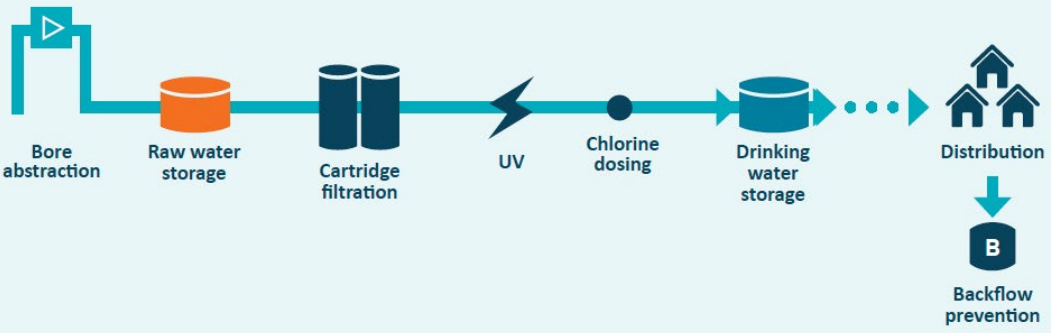
Please take a photo of the drawn picture of your supply and provide it with other photos of your supply.

Confirmation of attachments – tick relevant boxes

- ☐ Your drawn picture (flow diagram or schematic) is included below or attached (a scan or photograph is fine).
- ☐ Photos of my supply are attached to this Drinking Water Safety Plan.

Optional space for your drawn picture

Example only



Question 3: What can go wrong?

What are the risks to your water supply and how will you control them?

Below are some common risks which can cause rapid outbreaks of illness for consumers.

- [ ] **Pathogenic bacteria**
- [ ] **Protozoal contamination**
- [ ] **Loss or reduction of source of water supply**

Potential hazards

- [ ] **A. Bore water** – contamination through bore head

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

How will you control the risk?

- [ ] Bore head fenced at least 5m away
- [ ] Bore head on hard standing apron with concrete surround
- [ ] Bore head maintained in good condition
- [ ] Other

- [ ] **B. Rain water** – contamination through roof, guttering, pipes and other elements used in rainwater collection

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

How will you control the risk?

- [ ] First flush diverter installed
- [ ] Other

C. Hazards potentially present in untreated water

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

How will you control the risk?

- ☐ Filtration (rated at a minimum of 5 micron or less nominal pore size)
- ☐ UV disinfection (at least 40mJ/cm^2)
- ☐ Chlorination
- ☐ Other (please specify):

D. Remaining contamination due to inadequate treatment

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

How will you control the risk?

- ☐ Automatic shut-off if UV dose not met
- ☐ Alarm
- ☐ Other (please specify):

E. Contamination of treated water due to, for example, cracks or holes in water tanks/reservoirs, pipes breaking

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

How will you control the risk?

- ☐ Chlorination
- ☐ Backflow protection at:
- ☐ Regular maintenance:
- ☐ Pressure monitoring:

F. Chemicals which may be a hazard to your supply

These chemicals may arise from either the environment (such as nutrient run-off, industrial wastewater, or naturally occurring minerals such as manganese and arsenic) or due to treatment error (such as incorrect dosage levels).

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

How will you control the risk?

- Aeration and settlement
- Scouring
- Ability to switch to alternate source
- Use bottled or stored water when this is an issue
- Appropriate storage of chemicals
- Incorrect dosage levels

How will you control the dose?

G. Contamination of or changes to your catchment affecting your source water

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

How will you control the risk?

This could include developing good relationships with upstream users, the power company, the owner of the source water, whānau, hapū (in respect of rāhui), iwi Māori, farmers (in respect of pesticides), regional/district council

H. Other potential hazards (please specify):

Likelihood of occurrence: ◯ High ◯ Medium ◯ Low

What are the risks arising from these hazards?

How will you control the risks?

How will you know your controls are working?

Ways of checking your water supply is safe and sufficient

- Sampling and having my water supply tested every three months (mandatory)
- Making regular visual inspections of my water supply
- Recording regular maintenance and cleaning of machinery, etc
- Monitoring my water supply's treatment process
- Other (please specify)

Can you make any improvements and what is the timeframe for those?

How can the supply be improved to control the risk/s?

Timeframes for improvements to the supply

Question 4: How will you respond when an incident occurs?

What would be an urgent situation for your drinking water supply?

Incident type – tick relevant boxes (more than one may apply)

- [ ] Power cuts/loss of electricity supply
- [ ] Damage to or problems with your supply
- [ ] Failed sample
- [ ] Rāhui
- [ ] Inability of you or a back-up person to address any problems (through prolonged absence)
- [ ] Natural hazard event (e.g. flooding, earthquake)
- [ ] Outbreak of illness in the community (which could be an indicator of potential waterborne contamination)
- [ ] Other (please specify)

How will you respond to an incident?

For example, where you think your drinking water is or may be unsafe or does not comply with Drinking Water Standards.

Responses proposed in your plan – tick relevant boxes (more than one may apply)

- [ ] Take test samples and send them to an accredited laboratory for analysis
- [ ] Investigate the source or cause of the incident and address it as soon as possible
- [ ] Notify us of the incident
- [ ] Notify consumers of the incident
- [ ] Provide advice to your consumers on what to do until the safety of their drinking water is confirmed
- [ ] Take measures to ensure the problem does not re-occur
- [ ] Other (please specify)

Question 5: When will you review your plan?

Triggers for review

- [ ] Routine review of safety plan effectiveness and update as required

  Reviewer:

  Timeframe:

- [ ] Water has been unsafe or there was an incident or event, including a test analysis indicating a Maximum Acceptable Value (MAV) non-compliance?

  Reviewer:

  Timeframe:

- [ ] There has been a change to your water source:

- [ ] There has been a change in who looks after your water source and/or supply:

- [ ] Other (please specify):

Approval by drinking water supply owner or representative

Approver's name:

Date:

Signature:

Next steps

Please return your completed Drinking Water Safety Plan to us, by:

- **Website:** submit via Hinekōrako on our website
- **Email:** info@taumataarowai.govt.nz
- **Post:** Level 2, 10 Brandon Street, PO Box 628, Wellington 6140, New Zealand

Store a copy of this plan in a place that is easily accessible to you (and any others involved in managing or operating the drinking water supply).

Questions?

Refer to the Drinking Water Safety Plan Guidance or our website: Drinking water safety planning | Taumata Arowai or contact your local team | Taumata Arowai for more information.