

# CHAUTAUQUA COUNTY HEALTH DEPARTMENT PRIVATE DRINKING WATER STANDARD FOR ULTRA VIOLET DISINFECTION

**This system is intended for use in private homes whose water does not meet bacteriological quality standards.**

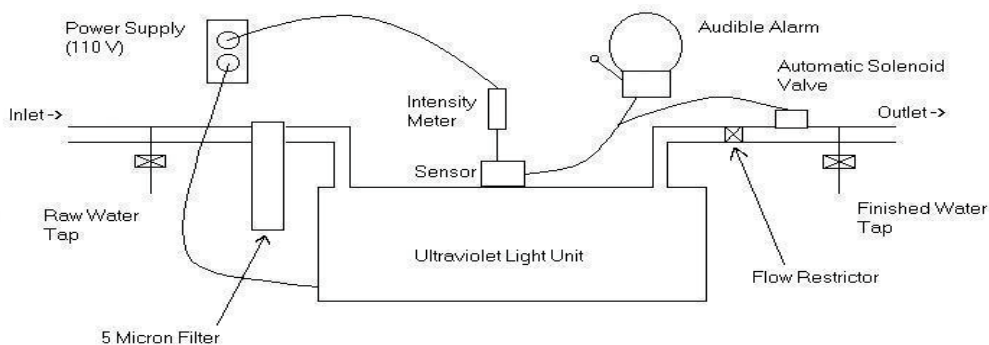
**Note to installer: you must certify that ALL steps below have been completed by placing a check mark in each box, signing this form and returning it to the Chautauqua County Health Department.**

- 1. Water Quality – In order to disinfect with UV light the water must meet the following quality criteria or the system will not disinfect properly. Use a certified lab or a water treatment professional to test the water for the following parameters **before** you purchase a UV system. Results must be attached to this form and be certified in writing by the tester.

<u>Parameter</u>	<u>Limit</u>
Iron	0.3 mg/l
Manganese	0.05 mg/l
Hardness (calcium)	300 mg/l
Hydrogen sulfide	1 mg/l and/or no apparent odor
Turbidity	1 NTU
Color	15 color units and/or no apparent color

- 2. UV light:
  - a.) Must be NSF or UL approved for use with drinking water.
  - b.) Must be sized to pump capacity, or flow restriction provided
  - c.) Must have automatic shut off valve in case of bulb failure or power outage.
  - d.) Must have automatic, audible alarm, indicator lights, or intensity meter to monitor bulb output.
  - e.) Quartz sleeve must be easily or automatically cleaned.
- 3. A spare bulb must be kept on site in a cool dry place.
- 4. The unit must be cleaned and the bulb replaced following manufacturers recommendations, typically once per year.
- 5. Disinfect the plumbing with chlorine after the installation of the light.
- 6. Test water for bacteria after the system has been installed and all of the chlorine has been flushed from the plumbing.
- 7. We recommend that you have your water tested for bacteria at least once a year to check the effectiveness of your system.
- 8. If it is a seasonal home the system must be disinfected with chlorine at the beginning of each season.
- 9. Homeowner must be provided with all manufacturers' literature.

### UV light Disinfection Schematic



UV system Installed by: \_\_\_\_\_  
Company

\_\_\_\_\_  
Name of installer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone #