

KITSAP PUBLIC HEALTH BOARD - AGENDA

September 4, 2018

1:45 p.m. to 3:00 p.m.

Norm Dicks Government Center, First Floor Chambers
Bremerton, Washington

- 1:45 p.m. 1. Call to Order
Mayor Becky Erickson, Chair
- 1:46 p.m. 2. Approval of July 3, 2018 Meeting Minutes
Mayor Becky Erickson, Chair
- 1:48 p.m. 3. Approval of Consent Items and Contract Updates: See Warrant and EFT Registers and Contracts Signed Report
Mayor Becky Erickson, Chair
- 1:50 p.m. 4. Public Comment (***Please note that verbal testimony for the Drinking Water Supply Regulations is completed and closed; testimony for Environmental Health Fee Schedule will be accepted during Agenda Item No. 7 if it is considered for action.**)
Mayor Becky Erickson, Chair
- 2:00 p.m. 5. Health Officer and Administrator Reports
Dr. Susan Turner and Keith Grellner

ACTION ITEMS

- 2:10 p.m. 6. Public Hearing Continued for Decision Only (No Public Testimony):
Ordinance 2018-01, Drinking Water Supply Regulations
John Kiess, Environmental Health Director
- 2:15 p.m. 7. Public Hearing (If Needed): **Resolution 2018-04**, Approving Amended Environmental Health Service Fees
Keith Grellner, Administrator

DISCUSSION / INFORMATION ITEMS

- 2:20 p.m. 8. Executive Session: Pursuant to RCW 42.30.140(4)(b), Discussion Related to Collective Bargaining
Rod Younker, Summit Law Group

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2:35 p.m. 9. Communicable Disease Prevention: Syringe Exchange Program
Katie Eilers, Community Health Director

3:00 p.m. 10. Adjourn

**KITSAP PUBLIC HEALTH BOARD
MEETING MINUTES
Regular Meeting
July 3, 2018**

The meeting was called to order by Board Chair, Mayor Becky Erickson at 1:45 p.m.

REVIEW AND APPROVE AGENDA

There were no changes to the agenda.

BOARD MEETING MINUTES

Commissioner Rob Gelder moved and Mayor Rob Putaansuu seconded the motion to approve the minutes for the June 5, 2018, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The July consent agenda included the following contracts:

- 1511 Amendment 1 (1830), *Clallam, Jefferson, Kitsap and Mason Counties, Hood Canal Regional Septic Loan Program*
- 1749 Amendment 3 (1833), *Washington State Department of Health, Consolidated Contract*

Mayor Putaansuu moved and Commissioner Gelder seconded the motion to approve the consent agenda, including the Contracts Update and Warrant and Electronic Funds Transfer Registers. The motion was approved unanimously.

PUBLIC COMMENT

Mayor Erickson noted that there will be time for public testimony regarding Resolution 2018-04, Approving Environmental Health Service Fees, later in the session. She asked if there were any public comments related to things other than water supply. Commissioner Gelder clarified that the verbal and written testimony for Ordinance 2018-01, Drinking Water Supply Regulations was closed.

There was no public comment.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Health Officer Update:

Dr. Susan Turner, Health Officer, provided the Board with two updates.

First, Dr. Turner said that, as of May, flu season is officially over. She noted that the Health District would continue surveillance and produce respiratory illness reports monthly during the summer (versus weekly during the winter). Additionally, Dr. Turner said the Health District

epidemiology team will produce an annual summary report comparing this flu season year to previous years.

Next, Dr. Turner informed the board that the Northwest Family Medicine Residency is open and operating. She said the residency program has eight new residents. She said Health District staff provided presentations on public health issues to the residents on their first day. She said Dr. Mike Watson, the program director, was present at today's Board meeting.

There was no further comment.

Administrator Update:

Mr. Keith Grellner, Administrator, reminded the Board that there is no Health Board meeting in August. He said the next meeting is Tuesday, September 4th, the day after Labor Day weekend. He said Health District staff would follow up with the Board to remind them of the September Board meeting. He said the September Board agenda will include a presentation on the safe syringe exchange program by Katie Eilers as well as an executive session with the Health District's labor law attorney to begin discussion on the 2019 union negotiations.

Mr. Grellner said that, due to there being no August meeting, he will likely need to work with Chair Erickson to approve contracts that come in prior to the September consent agenda, per Board bylaws. He noted that any items approved by Mayor Erickson will be brought back to the Board for affirmation in September.

Lastly, Mr. Grellner noted that, with the arrival of budget season, he will be meeting with each of the jurisdictions in the near future to make funding requests. The Health District's budget presentation to the County Board of Commissioners is in September. He also reminded the Board that there are three finance committee meetings scheduled and that the members are Mayor Erickson, Commissioner Charlotte Garrido, and Mayor Greg Wheeler. He said the tentative dates set for the finance committee meetings are September 25th, October 18th, and November 8th, 2018.

Commissioner Gelder asked if the syringe exchange presentation planned for September was the same one that had been deferred from the June agenda. Mr. Grellner confirmed this.

There was no further comment.

**PUBLIC HEARING CONTINUED FOR DECISION ONLY, REGARDING
ORDINANCE 2018-01, DRINKING WATER SUPPLY REGULATIONS**

Mayor Erickson informed the Board that two of the County Commissioners were not in attendance at today's meeting. Mayor Erickson said that, since most of the group B wells are located in the county and very few are in the city limits, she felt that it would not be appropriate to take action without all the Commissioners. She asked the Board for a motion to move the hearing to the September Board meeting.

Mayor Wheeler moved and Commissioner Gelder seconded the motion to postpone the hearing regarding ordinance 2018-01, Drinking Water Supply Regulations, to the September 4th regular meeting. Mayor Kol Medina said that he supports the motion, though he would be comfortable voting today, he understands the reasoning for postponing. The motion was approved unanimously.

There was no further comment.

PUBLIC HEARING: RESOLUTION 2018-04, APPROVING AMENDED ENVIRONMENTAL HEALTH SERVICE FEES

Mayor Erickson said she would welcome another motion to postpone this hearing until September because it is dependent on the passing of Ordinance 2018-01.

Mayor Medina moved and Mayor Putaansuu seconded the motion to postpone the public hearing regarding Resolution 2018-04, Approving Amended Environmental Health Service fees to the September 4th regular meeting.

Commissioner Gelder noted the written record continued to be open for one week after the June Board meeting. Commissioner Gelder asked Mr. John Kiess, Environmental Health Director, to provide an update on the comments received during that time, including a response to Mr. Overfield's suggestions.

Mr. Kiess said seven new comments were received, many of which were similar to the original set of comments. The comments questioned why there is a fee and why is it being charged to every system, not just to non-compliant systems. Mr. Kiess explained that the answers remain the same: the fee is a basic administrative fee which applies to all systems, not just those that are in or out of compliance. He also noted that those comments were added to an updated summary, which can be found on the Health District website.

Mr. Grellner added that Mr. Overfield's suggestion was something the Health District has considered over the last two years, however the Health District is not ready to propose those changes at this time. He said, due to Board recommendation, the Health District has pared the program back significantly. Because of this, Mr. Grellner doesn't believe the Health District could, at this time, provide a sustainable program in the way that Mr. Overfield suggested. However, he said once the Health District can get more systems compliant, it's possible the Health District may be able to implement Mr. Overfield's suggestions, such as reduced or no fees for systems doing an outstanding job and higher fees for systems that are not compliant.

Mayor Erickson asked Mr. Grellner to write a paragraph reiterating the above statement and bring it to the Board at the September 4th Board meeting, along with the updated comments summary. Mr. Grellner and Mr. Kiess agreed.

Mayor Erickson thanked the Board again for postponing the two public hearings until all of the County Commissioners can be present.

There was no further comment.

RESOLUTION 2018-05, SUPPORTING POLICIES TO REDUCE SOLID WASTE AND LITTER FROM SINGLE-USE SHOPPING BAGS BY PROMOTING THE USE OF REUSABLE BAGS

Mr. Grellner informed the Board that the City of Bainbridge Island adopted an ordinance in 2012 that regulates the distribution of single-use plastic and biodegradable carryout bags to discourage their use and encourage the use of reusable bags. Recently, Kitsap County and the City of Port Orchard have also considered adopting some type of code to reduce the use of single-use bags. At least 17 other jurisdictions in Washington state have also adopted local codes addressing single-use bags, as well as many other jurisdictions throughout the United States. Mr. Grellner also noted he recently learned that the entire country of Australia adopted a single-use bag ban.

Mr. Grellner said the intent of the draft resolution is to support, from a public health perspective, all the local Health Board member jurisdictions that wish to take a more direct role to reduce solid waste and litter by reducing the public's reliance on single-use bags (plastic and paper) and promoting reusable bags.

Mayor Medina commented that he supports the resolution. He also said that when this was first discussed by the Bainbridge City Council, council members and some citizens had big concerns, however, now that it has been in place for a while, it's going very well.

Mayor Erickson said the City of Poulsbo will be looking closely at a single-use bag ban in the next few months.

Mayor Wheeler said he is supportive and asked what options there might be for folks who don't have easy access to washing machines to clean their bags. Mr. Grellner said hand washing will remove majority of contaminants. He also said he has seen many different ordinances with options, such as a small fee to purchase or receive a paper bag, and he described the different types of bags that can be used.

Mayor Wheeler asked when a deeper discussion might occur. Commissioner Gelder said he believes this resolution shows support of the Health Board to each jurisdiction in their own policies and that a deeper dive would occur as each jurisdiction drafts their own policies.

Mayor Wheeler asked if the Health District wished to approve a resolution at this meeting. Mr. Grellner confirmed and said the Health District is ready when the Board is ready. Mr. Grellner added that the resolution was written in a way that is supportive but doesn't instruct the jurisdictions on how to implement their own policies.

Mayor Putaansuu said that when the City of Port Orchard held a town hall to discuss this, nobody argued that plastic is good for the environment. He said it's important to hear how everyone would like the policy to be implemented and he thinks that each jurisdiction will have

slightly different policies. He said people were generally opposed to a surcharge, but that is for each jurisdiction to figure out. Additionally, he said he plans to support to resolution and said it would make a powerful statement for Kitsap County to be the first to implement a countywide bag ban.

Mayor Wheeler said if the Health District strongly supports the single-use bag ban and believes it is protective of public health, he will support the resolution.

Commissioner Gelder moved and Mayor Medina seconded the motion to approve Resolution 2018-05, Supporting Policies to Reduce Solid Waste and Litter from Single-Use Shopping Bags by Promoting the Use of Reusable Bags. The motion was approved unanimously.

Mr. Grellner said Health District staff will send a signed copy of the resolution to each jurisdiction to be used as needed. He said if any of the jurisdictions could use assistance during their proposals of a bag ban ordinance, a Health District staff member will attend their meetings.

OPIOID UPDATE PRESENTATION

Dr. Turner provided the Board with an update on the opioid crisis and opioid use disorder in Kitsap and nearby counties, at the Board's request. She said the presentation was based on the work she was doing in the region, and that she also invited some other important partners to answer any additional questions the Board might have. She introduced Sheriff Gary Simpson; Doug Washburn, Director, Kitsap County Human Services; Dr. Lisa Rey Thomas, Olympic Community of Health (OCH) Director of Community and Tribal Partnership; Dr. Mike Watson, Director, Northwest Family Medicine Residency; and Anderson Edgerton, Administrator, Salish Behavioral Health Organization.

Opioid addiction is a very serious and growing problem, and its consequences seem to have touched every sector of Kitsap's many various communities. In response to the growing opioid crises, the Accountable Community of Health for Kitsap, Jefferson and Clallam Counties --- the Olympic Community of Health (OCH) --- has established the Three County Coordinated Opioid Response (3CCORP), modeled after the Washington State Opioid Response Plan.

A Steering Committee for 3CCORP was established in the fall of 2016; Dr. Turner is on this committee as well as the Misuse Prevention Workgroup and the Opioid Use Disorder Treatment Workgroup. A three-county Opioid Summit was held in January 2017 in Kingston. The 3CCORP Steering Committee and three accompanying workgroups (the two mentioned above and Opioid Overdose Prevention) have continued to meet over the past year, bringing together many sectors of our community from the three-county area, to create a unified collective impact effort to prevent addiction, improve access to evidence-based treatment, and prevent opioid overdoses.

A few key notes from the presentation include:

- Medication Assisted Therapy (MAT) treatment reduces risk of overdose death by half compared to mental health treatment alone.
 - Mayor Erickson asked how long vivitrol has been on the market. She said she knows this is a newer medication and noted that when there was talks of Methadone being used in Bremerton, suboxone and vivitrol were not available. Dr. Turner said she knows suboxone was available but wasn't readily used here.
- An Opioid Abuse Treatment center would likely see a more complicated diagnosis of opioid abuse, much like diabetes.
- Federal law changed in 2002 for practices to allow suboxone in practice.
- OCH is playing the role of the backbone organization in this model, similar to the collective impact model.
- Many of the Health District roles in the opioid crisis relate to the Foundational Public Health Services (FPHS).
 - Mr. Grellner emphasized that there are a lot of things that are classified as public health issues, but that doesn't necessarily make it the sole responsibility of a public health agency to solve the issue. He noted there are many other agencies that are directly responsible for this work and have more expertise in this issue.
- A second Opioid Summit is planned for October 17, 2018.
- Law enforcement officers have saved seven lives since carrying Naloxone on calls.
- State legislators have asked the 3CCORP group to advise them on the needs of our region, some of which have already been added to upcoming state legislation.
- Sustainable funding for cross-community models, like the 3CCORP, is needed.

Mayor Erickson asked Dr. Turner, if she could ask for anything, what is the number one need she would want addressed. Dr. Turner said, she would want to build capacity so that those who need opioid treatment therapy in Kitsap County can get it. She said there are not enough trained Substance Abuse Treatment providers in the county.

Commissioner Gelder asked Dr. Turner to which data source she had mentioned earlier in the presentation that provided good data through 2017. Dr. Turner said she will send a link to the Board.

Mayor Wheeler asked Dr. Turner to clarify if our county is low in overdose deaths in comparison to other counties in the state. Dr. Turner said Kitsap is low only compared to the state average. Mayor Wheeler said he has heard that the highest risk for overdose death are in people who go off the drug for a long time and then go back to original dosage. Dr. Turner agreed and said many studies have identified this as a very high-risk time period in users due to loss of tolerance during detoxification. Additionally, she said her other wish would be that people who are incarcerated have access to treatment and are automatically enrolled in treatment as they leave jail.

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 2:55 p.m.

Becky Erickson
Kitsap Public Health Board

Keith Grellner
Administrator

Board Members Present: *Mayor Becky Erickson; Commissioner Rob Gelder; Mayor Kol Medina; Mayor Rob Putaansuu; Mayor Greg Wheeler.*

Board Members Absent: *Commissioner Charlotte Garrido; Commissioner Ed Wolfe.*

Community Members Present: *Shirlee Clarke, League of Women Voters – Kitsap; Betsy Cooper, League of Women Voters – Kitsap; Susan Daniel, League of Women Voters – Kitsap; Anders Edgerton, Salish Behavioral Health Organization; David Ellingson, Self; Rhonda Fairgrieve, League of Women Voters – Kitsap; Glenn Jurges, Enetai Water System; Wendy McClure, Kindle Ridge Water System; Gary Simpson, Kitsap County Sheriff; Lisa Rey Thomas, Olympic Community of Health; Doug Washburn, Kitsap County Human Services; Michael Watson, M.D., Northwest Family Medical Residency.*

Staff Present: *Amy Anderson, Public Health Educator, Public Health Emergency Preparedness and Response; Angie Berger, Administrative Assistant, Administration; Karen Boysen-Knapp, Community Liaison, Chronic Disease Prevention; Yolanda Fong, Assistant Director, Community Health Division; Lauren Funk, Disease Intervention Specialist, Communicable Disease; Keith Grellner, Administrator; Karen Holt, Program Manager, Human Resources; Dayna Katula, Manager, Food and Living Environment; John Kiess, Director, Environmental Health Division; Megan Moore, Community Liaison, Chronic Disease Prevention; Susan Turner, M.D., Health Officer, Administration.*

MEMO

To: Kitsap Public Health Board
From: John Kiess, Environmental Health Director
Date: September 4, 2018
Re: Proposed Drinking Water Supply Regulations, Ordinance 2018-01

Background

The Health Board held a public hearing on [proposed Ordinance 2018-01, Drinking Water Supply Regulations](#), on June 5, 2018. At the end of public testimony, the Health Board decided to continue the hearing until the July 3rd meeting, and directed the Health District to take additional written comments on the proposed ordinance until June 12, 2018. The Health Board closed verbal testimony during the June 5th meeting.

At the July 3, 2018, Health Board meeting, the Health Board elected to postpone a decision on the proposed ordinance due to the limited representation of the Board of County Commissioners and continued the hearing --- for decision only --- until today's meeting. The purpose of this agenda item today is for the Health Board to act on the proposed Drinking Water Supply Regulations.

In accordance with the Health Board's direction at the June 5th meeting, the Health District has updated the supporting documentation posted [on our proposed Drinking Water Supply Regulations](#) webpage, solicited additional public comment, and provided another notice to Group B water systems about the proposed changes to the ordinance.

The Health Board has had a local drinking water ordinance of some form in effect since 1991, but the current 1999 ordinance is antiquated and in need of an update.

A copy of the proposed ordinance is included in **Attachment 1**; the ordinance and supporting documentation have also been posted [here](#) on our website.

Summary of Proposed Ordinance Development Process

The ordinance revision process was initiated in 2016 and was developed with input from Group B water system users/owners, Kitsap County water system managers, the Kitsap County Water Purveyors Association, the Kitsap Builders Association, and the Kitsap Association of Realtors. A summary timeline for the development of Ordinance 2018-01 is contained below:

Summary of the Ordinance Development Process and Public Outreach

July 2016	Kitsap Public Health Board meeting presentation #1
March 2017	Kitsap Public Health Board meeting presentation #2
March 2017	Notification sent to Group B water systems
March 2017	Electronic subscription system for revision updates implemented*
March 2017	Kitsap Sun article about proposed ordinance revision
March 2017	Drinking Water Ordinance Revision webpage developed
March 2017	Public Listening Session #1
April 2017	Kitsap Public Health Board meeting update
June 2017	Health Board Policy Committee meeting #1
December 2017	Health Board Policy Committee meeting #2
May 2018	Kitsap Public Health Board meeting presentation #3
May 2018	Notification sent to Group B water systems
May 2018	Public Listening Session #2
June 2018	Public Hearing
July 2018	Continuation of Public Hearing for Decision Only

* Note: We have 983 subscriptions to our electronic notification system to provide updates on the ordinance development process.

Summary of Proposed Drinking Water Supply Regulations - Ordinance 2018-01

Based on the Board’s direction, public comments, and staff recommendations, the proposed drinking water supply regulations include the following changes as compared to the existing rules, [Ordinance 1999-6](#):

- **Eliminates** an existing requirement that all Group B public water systems undergo a complete sanitary survey inspection by the Health District at least once every 5 years.
- **Requires** owners of property connected to a Group B public water system or private well to apply to the Health District for a “Water Status Report” only at the time of property sale. A water status report provides information about the drinking water supply and will address any applicable drinking water requirements or concerns. In the past, these reports have been optional, but under the proposed ordinance would now be required. This requirement has an effective date of 6-months after ordinance adoption (see Section 9, page 30 of the draft ordinance).
- **Requires** Group B public water systems to obtain an annual operating permit (\$75/year) to cover Group B water systems administration costs. The permit fees would raise approximately \$65,000/year to fund Group B administration work (recordkeeping, sampling reminders, data management, technical assistance, complaint response, and enforcement) as required through state and local codes and agreements. This revenue will replace state funding to operate the program that was cut in 2009 and will allow the Health District to resume basic levels of service for Group B systems. This requirement has an effective date of 6-months after ordinance adoption (see Section 9, page 25 of the draft ordinance).

- **Requires** each Group B public water system to file a “user’s agreement” if there is not one already in place. A user’s agreement legally establishes details about the water system’s ownership and management and is recorded to the title of each property connected to the system. This requirement has an effective date of 12-months after ordinance adoption (see Section 9, page 24 of the draft ordinance).
- The proposed ordinance **does not** require owners of 1 or 2 party private wells to obtain an annual operating permit or pay an annual fee.

Summary of Public comment on the proposed ordinance

To date, we have received comments from 41 individuals about the proposed ordinance, representing 28 of our local Group B public water systems (3% of 857 total Group B systems). Eleven (11) of the commenters are supportive of the proposed ordinance and 28 are opposed to the proposed ordinance, with 2 neutral to the proposal.

For the 28 commenters opposed to the proposed ordinance, they represented 19 local Group B water systems. Of these 19 systems, 15 of them had benefitted in the past from Health District technical assistance that was previously covered with state funding *without cost to them*, and 7 of the water systems are currently out of compliance with existing regulations. The proposed ordinance and annual permit fee would address these services and situations.

A summary of all received comments is included in **Attachment 2**. The Health District’s response to comments received is summarized in **Attachment 3**.

The most common comment received was opposition to the proposed Group B water system annual permit fee. Many commenters stated that only the water systems with problems or that were out of compliance should pay a fee. The proposed annual fee will cover the Health District expenses to perform basic administrative services for all Group B systems, whether in compliance or out of compliance:

- Water system file maintenance and record keeping;
- Service/sampling reminders;
- Fulfilling data and public records requests about the water system design and capacity;
- Responding to public complaints;
- Providing technical assistance during contamination events and boil water alerts; and
- Entering and tracking water quality data to ensure that people are receiving clean and safe water.

During the July 2018 Board meeting, it was noted that a comment suggesting an incentivized fee structure should be addressed. The Health District has considered an alternative fee structure for Group B public water systems based on their compliance status, however the Health District is not ready to propose those changes at this time. As the proposed ordinance has been significantly pared back since its original version, the Health District could not provide a

sustainable program with a tiered fee structure. It may be possible to develop an alternative fee structure in the future as more systems come into compliance and/or other funding sources become available to operate our local drinking water program.

Recommended Action

The Health Board may wish to make and approve the following motion:

The Board moves to approve Ordinance 2018-01, Drinking Water Supply Regulations.

Please feel free to contact me at any time regarding these proposed fee revisions. I can be reached at (360) 728-2290, or john.kiess@kitsappublichealth.org with any questions or comments.

KITSAP PUBLIC HEALTH BOARD

ORDINANCE 2018-01

DRINKING WATER SUPPLY REGULATIONS

**EFFECTIVE
TBD**

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Kitsap Public Health Board Ordinance 2018-01
Drinking Water Supply Regulations

SECTION 1. AUTHORITY, PURPOSE, AND OBJECTIVES

- A. These regulations are promulgated under the authority of Chapters 18.104.043, 70.05, 70.46, and 70.142 of the Revised Code of Washington (RCW) and Chapters 246-290, 246-291, and 173-160 Washington Administrative Code (WAC).
- B. Other state statutes and codes, and local ordinances and codes relating to these regulations are:
 - 1. RCW 19.27 and 70.116;
 - 2. WAC 246-295;
 - 3. Kitsap County Ordinance 524 (2015) and Title 9, Chapter 9.52 of the Kitsap County Code, *Kitsap Public Health District*; and
 - 4. Kitsap County Board of County Commissioners Resolution 305-1993 and Title 13, Chapter 13.06 of the Kitsap County Code, *Coordinated Water System Plan*.
- C. The purpose of this ordinance is to protect, preserve, promote, and improve the public health and safety and prevent waterborne disease by:
 - 1. Establishing minimum standards for the design, construction, and operation of public and private water systems and wells;
 - 2. Establishing minimum standards for ongoing monitoring of drinking water supplies; and
 - 3. Establishing minimum standards for ongoing public water system operation, inspection, maintenance, and source water protection.
- D. This ordinance regulates:
 - 1. Potable and non-potable water supplies;
 - 2. Private drinking water supplies; and
 - 3. Group B public water systems.
- E. These regulations are intended to coordinate with other applicable state and local regulations for water system design; well construction; water resources; sewage control; solid waste; food handling; building; land use/land use planning; and critical areas.

Kitsap Public Health Board Ordinance 2018-01
Drinking Water Supply Regulations

- F. It is the specific intent of this ordinance to place the obligation of complying with its requirements upon the owner, operator, purveyor, or user of a public water system, private water supply, or non-potable water supply. No provision and no term used in this ordinance is intended to impose any duty whatsoever upon the Kitsap Public Health District (Health District) or any of its officers or employees, for whom the implementation or enforcement of this ordinance shall be discretionary and not mandatory.

- G. It is the intent of this ordinance to provide for fair, equal, and reasonable treatment of all persons that are subject to these regulations, and to allow for Health Officer discretion in the application of these regulations as they deem necessary to protect public health. Nothing in these regulations is intended to abridge or alter the rights of action by the state, or by persons that exist in equality, common law, or other statutes, to abate pollution or a nuisance.

SECTION 2. ADMINISTRATION

- A. This ordinance shall be administered in part according to the most current signed Joint Plan of Responsibility or Memorandum of Agreement for public water supplies between the Washington State Department of Health (DOH) and the Kitsap Public Health District (Health District) and by development of administrative policies and guidelines as deemed necessary by the Health Officer to provide further definition of the requirements of this ordinance.

- B. In order to protect the general public's health and safety, the Health Officer is authorized to administer local regulations contained herein, including Resolution 305-1993, Kitsap County Coordinated Water System Plan and Kitsap County Ordinance 134, Minimum Design Standards for Public Water Systems and Establishing Procedures for Implementation. In order to protect the health and safety, the Health Officer is authorized to administer the regulations contained in Chapter 246-290 WAC, Chapter 246-291 WAC, and Chapter 173-160 WAC, except where made more stringent by these local regulations. In addition, the Health Officer is authorized to promulgate and administer such additional regulations as are necessary in his/her judgment to carry out the provisions of these rules and regulations. Where/If State or local regulations conflict, the more stringent shall apply.

- C. Through the authority of the Kitsap Public Health Board as granted in RCW 70.05.060, the Health Officer may charge fees for the administration of this ordinance. Fees will be charged in accordance with the fee schedule approved by the Kitsap Public Health Board.

SECTION 3. DEFINITIONS

The definitions in WAC 246-291-010, Group B Public Water Systems, are hereby adopted by reference. Unless specified herein, all words and terms shall be defined by their common dictionary definition.

Abandoned Well: Any well that is unmaintained, unused, unusable, not intended for future use, or is a risk to public health and welfare.

Binding Water Availability Letter: A letter issued by an authorized representative of a public water system that ensures that the water system can and will provide water service to the recipient for the period described on the letter.

Constant Rate Pumping Test: A test that is conducted to determine aquifer or well characteristics. Components of a pump test include the static water level, drawdown, stabilization and recovery rate. The pumping rate during the test shall vary less than 10% from the average pumping rate throughout the entire pumping test.

Designer: A person who matches site and soil characteristics with appropriate onsite sewage technology and regulations; this term applies to both onsite sewage treatment system designers licensed under Chapter 18.210 RCW and professional engineers licensed under Chapter 18.43 RCW.

Development: The creation or existence of a residence, commercial building, structure, facility, mobile home park, subdivision, planned unit project, site, area, or any activity that may or has resulted in the use of a water supply on a parcel of property.

Existing Unapproved Public Water System: A public water system with or without a Washington State Department of Health issued identification number, but is in use and has been installed, in whole or in part, without approval of plans or engineering documents by the Health Officer or Department.

Expansion: A change in a building, structure, facility, site, development, or use that causes an increase in water demand or change in water supply requirements.

Health District: The Kitsap Public Health District.

Health Officer: The Health Officer of the Kitsap Public Health District, or his or her designee.

Individual Private Water Supply: A water supply that serves a single dwelling unit.

Kitsap Public Health Board Ordinance 2018-01
Drinking Water Supply Regulations

Public Sewer System: A sewerage system owned or operated by a city, town, municipal corporation, county, or other approved ownership, consisting of a collection system and necessary trunks, pumping facilities and a means of final treatment and disposal; and approved by or under permit from the Department of Ecology, the Department of Health or the Health Officer.

Purveyor: An agency, subdivision of the state, municipal corporation, firm, company, mutual or cooperative association, institution, partnership, or person or other entity owning or operating a public water system. Purveyor also means the authorized agents of these entities.

Qualified Individual: An individual who can collect a water sample for the purposes of a drinking water application review by the Health District. A qualified individual shall be a licensed well driller, pump installer, Washington State Department of Health certified operator, or another qualified licensed/certified individual such as a professional engineer, registered sanitarian, realtor, or licensed wastewater designer. The qualified individual must be a third party to the application being reviewed by the Health District. A Group B water system purveyor is considered qualified to collect water samples from a system they own or operate.

Sanitary survey: A review, inspection, and assessment of a Group B public water system, which should occur at least once every five (5) to ten (10) years, to determine the adequacy of the system and its operation for producing and distributing safe and reliable drinking water. Completed survey reports shall be submitted to the Health Officer on approved forms within 30 days of completion. Sanitary surveys shall be completed by the Health Officer, a Department of Health certified operator, a Satellite Management Agency, or the purveyor of the Group B water system being surveyed. Each survey includes, but is not limited to, an evaluation of the following components:

- a. Source;
- b. Treatment;
- c. Distribution system;
- d. Finished water storage;
- e. Pump, pump facilities, and controls;
- f. Monitoring, reporting, and data verification;
- g. System management and operation; and
- h. Operator compliance.

Significant Deficiency: Defects in design, operation, or maintenance, or a failure or malfunction of the sources, treatment, storage, or distribution system that the Health Officer determines to be causing, or have potential for causing, the introduction of contamination into the water delivered to consumers. If left unaddressed, a significant deficiency directly creates a significant public health risk.

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Stabilization: Has occurred when the water level has dropped less than or equal to 0.1 foot per hour.

Surface Water: Any body of water, whether fresh or marine, which either flows or is confined in a natural or artificial depression or drainage course and contains water during any of the months of May through October, or has been identified as a significant drainage feature. Such bodies include, but are not limited to, natural and artificial lakes, ponds, rivers, streams, swamps, marshes, tidal water and wetlands.

Two Party Private Water Supply: A water supply that serves two dwelling units.

SECTION 4. JURISDICTION AND APPLICABILITY

A. General Requirements

1. These regulations shall apply to all territory contained within the boundaries, and under the supervision, of the Kitsap Public Health Board.
2. These regulations shall apply to the owner, operator, purveyor, or user of public water system, private drinking water supply, or a non-potable water supply.
3. These regulations shall apply to licensed and/or certified contractors, or other persons, that perform any type of work, construction, repair, replacement, adjustment, modification, or improvement to any water supply.

B. Existing Development or Water Supply

1. All dwellings or other structures necessitating a potable water supply, and in existence prior to the effective date of these regulations, shall not be required to conform to the provisions of these regulations - except for the water status report requirements for property being conveyed -- unless it is determined by the Health Officer any of the following have occurred:
 - a. A water supply determined to be inadequate and a health hazard due to quantity or quality; or

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- b. A water supply connected to a building or structure that has been modified or expanded without approval from the Health Officer and/or applicable building department; or
 - c. A change in water supply to a structure without Health Officer approval; or
 - d. A water supply not being used consistent with the terms and conditions of its approval or its original intended use. A water supply source for a Building Site Application (BSA) approved prior to the effective date of these regulations will be valid until the three-year expiration date has lapsed; or
 - e. A public water supply that does not meet the requirements of Sections 9 and 10 of this regulation.
- 2. These regulations shall apply to all land use and building applications for building permits submitted on or after the effective date of these regulations, as defined.
 - 3. Land use applications which have been granted preliminary approval but have not submitted plans for their proposed method of water service at the time of the effective date of these regulations, shall comply with all requirements of this ordinance.
 - 4. Public water system designs received prior to the effective date of this ordinance will be reviewed under the rules and regulations in effect at the time of submittal.
 - 5. Existing Wells. For any well discovered by the Health Officer through application review or field investigation, a determination of use will be required. If it is determined that the well is an abandoned well, the well shall be decommissioned in accordance with Chapter 173-160 WAC. If the well is in use, it shall be required to be approved for its proposed use as a drinking water supply or an irrigation supply.

SECTION 5. LOCAL POLICIES - ADOPTION BY REFERENCE

- A. The Health Officer shall have the authority to interpret these regulations and may develop and implement policy, within the scope of these regulations, as they determine necessary to protect public health.

- B. Local Standards and Policies, as they now exist or are hereafter amended, are hereby adopted by reference and expressly made part of these regulations.

SECTION 6. APPLICATION AND CONSTRUCTION STANDARDS

A. Purpose and Applicability

1. The purpose of the following requirements is to establish the minimum standards for drinking water supply as they relate to proposed new water supply connections.
2. It is the intent of these requirements to guide and enable the owner, designer, well driller, and Health Officer to comply with these regulations and to select, and design, the most appropriate drinking water supply to meet regulatory, site, and owner demands.
3. These requirements shall apply to the following situations for development (See Table 1 and Figure 1 for applicability guidelines):
 - a. New construction of any building or structure that proposes, or requires a water supply;
 - b. Expansion of an existing development;
 - c. Health District review of land use applications for planning departments within the jurisdiction of the Kitsap Public Health District.
4. These new construction requirements may apply to non-expansion building proposals for existing development for which there is no record of water supply approval;
5. Upon submittal of material facts and information regarding the water supply for a specific building proposal for an existing development, the Health Officer may waive, at their discretion, compliance with these construction requirements, or direct the applicant to comply with other less stringent sections of these regulations when it is determined that public health will not be put at risk by the proposal and the intent of these regulations will be met.

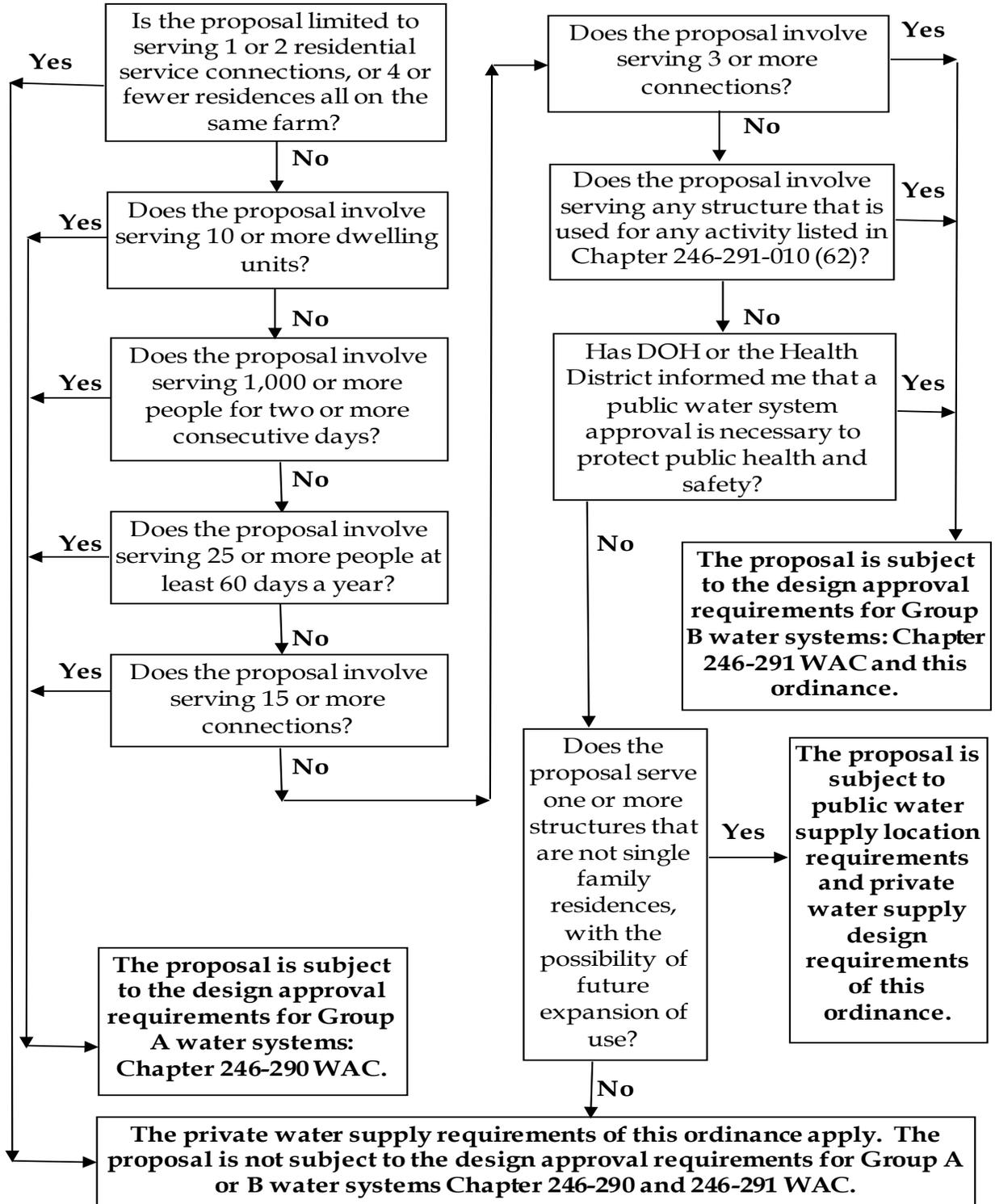
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Table 1. Guidelines to Determine Applicability of Water Supply Requirements

Example Project Proposals	Requirements
Replacement of existing dwellings with or without a record of approval for the water supply	Full private or public water adequacy requirements
Increase in water demand (e.g. number of bedrooms, non-residential occupants, accessory dwelling units, guest houses, etc.).	
Change in use of the property or structure (e.g., residential to commercial, office to restaurant, etc.)	
New construction	
Replacement water supply for existing structure (replacement well or new connection to public water)	Full private or public water adequacy requirements
Addition of outbuildings or garages with water supply and internal plumbing fixtures (e.g., buildings with no provisions for cooking or sleeping)	Private water supplies: compliance with WAC 173-160 well construction standards; Public water supplies: compliance with these regulations
Interior-only remodels	
Addition of new buildings or structures with no water supply or internal plumbing	

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Figure 1. Guidelines for Determination of Water Service



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B. General and Application Requirements

1. For a new (non-replacement) water service connection to a proposed structure or existing structure, a BSA or Building Clearance (BC) application must be submitted for review by the Health Officer. A BSA must be submitted by a designer. A BC may be submitted by a property owner and / or their authorized agent in accordance with Kitsap County Board of Health Ordinance 2008A-01.
2. For properties to be served by a public sewer system, a building clearance (BC) for sewer properties application must be submitted for drinking water supply review by the Health Officer.
3. Property owners and/or their authorized agent shall:
 - a. Contract with a designer to complete and submit a Building Site Application form, for water supply approval and onsite sewage treatment, to the Health Officer prior to beginning the construction process; or obtain Building Clearance approval from the Health Officer prior to beginning the construction process; and
 - b. Be responsible for the prompt payment of all Health Officer fees related to application submittal, review, and approval; and
 - c. Be responsible for the oversight of their contractors and of the applications submitted on their behalf; and
 - d. Ensure compliance with all applicable rules and regulations related to the development of their property; and
 - e. Inform their designer of all known restrictions, encumbrances, or special conditions related to the development or use of their property; and
 - f. Inform their designer of all proposed structures and uses of the property related to the proposed development; and
 - g. Be responsive to Health Officer requests for additional information needed to demonstrate compliance with these regulations; and

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- h. Consent to reasonable and necessary inspections to ascertain compliance with these regulations as they relate to the development proposal.
4. Designers, well drillers, and / or authorized agents shall:
- a. Contract their services only when their licensure is in good standing and in conformance with the applicable regulations;
 - b. Adhere and conform to the requirements of their licensing and these regulations;
 - c. Use forms and reporting systems designated for use by the Health Officer.
 - d. Be responsible for including and addressing in their submittals to the Health Officer all known restrictions, conditions, encumbrances, etc., that may affect compliance with these regulations;
 - e. Coordinate with the property owner to address water supply requirements as applicable to the proposed development in their applications;
 - f. Coordinate with the property owner to address building permit and storm water requirements as they relate to the water supply aspects of the proposed development;
 - g. Stipulate additional requirements for a specific development proposal if necessary to protect public health;
 - h. Only submit legible and complete application information;
 - i. Clearly label and identify all application information, and site features at the property site, so that it can reasonably be determined what specific site and/or application the information has been submitted for; and
 - j. Be responsive to Health Officer requests for additional information needed to demonstrate compliance with these, or other applicable, regulations.
5. The Health Officer shall:

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- a. Approve only designs and applications that meet the requirements and intent of these regulations;
 - b. Specify the expiration date on the approved application;
 - c. Specify the reason for denial or revocation of an application, including applicable code citations;
 - d. Not issue final approval for any application or development proposal where all applicable Health Officer fees have not been paid in full; and
 - e. Include a reminder on the application of the applicant's right of appeal.
6. The Health Officer may:
- a. Coordinate with the designer, well driller, and/or owner (or owner's authorized agent) to address minor omissions, errors, or shortcomings that hinder compliance with these regulations;
 - b. Stipulate additional requirements for a specific development proposal if necessary to protect public health;
 - c. Deny or return applications that do not conform to these regulations; and/or
 - d. Rescind approved applications when:
 - i. Public health is deemed to be threatened by continued implementation of the approved application;
 - ii. It has been determined that the approved plans or designs are not being followed;
 - iii. It has been determined that errors or omissions were made in the design or approval of the BSA, BC, or well site inspection application, or that conditions have changed with respect to the approved application; or

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- iv. It has been determined that there has been misrepresentation, non-disclosure, or concealment of material fact in the application information submitted by the applicant.
7. Building Site Application and Building Clearance application timelines shall be as described in Kitsap County Board of Health Ordinance 2008A-01 *Onsite Sewage System and General Sewage Sanitation Regulations*, as amended. Sewered building clearance application timelines will match building clearances for properties served by onsite sewage systems.
8. Approved applications for a replacement water supply to an existing structure (well site inspection application) shall expire, and no longer be valid, three (3) years and thirty (30) days from the date of submittal.
9. Compliance with all provisions of this ordinance shall be required for all water supplies. Land use conditions and regulations at the time of original property subdivision or lot creation will be considered during any water supply application review. An approved development with land use approval based on water service from a public water supply, for which a request/application is later submitted to drill a well for either a single-family residence or private two-party supply, may be required to amend the original land use application or record a notice to title to reflect a change in the proposed water service.

C. Connection to a Public Water System

1. The applicant shall provide a Binding Water Availability Letter signed by an authorized representative of the water system indicating that the system will serve the structure. The letter shall contain a signed statement that the authorized representative has reviewed the system records and ensures that the proposed service is within the scope of the system's approved design and water rights and is consistent with Chapter 246-290 WAC or Chapter 246-291 WAC.
2. Binding Water Availability Letters from Group B water systems will be reviewed based on the requirements of Chapter 246-291-280 WAC. For any new connection to an existing Group B water system, the system must be in compliance with all requirements of Sections 9 and 10 of this regulation.
3. For any connection to a proposed public water system, the new water system shall be fully adequate with respect to Chapter 246-290 WAC, or Chapter 246-291 WAC, Chapter 173-160 WAC, Kitsap County Code Chapter 13.28, and

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any other applicable State or local regulation or policy regarding public water supplies.

4. All new or expanding Group B water systems shall meet the design requirements of Section 8 of this regulation.
5. The previous water supply shall be properly decommissioned in accordance with Chapter 173-160 WAC.

D. Connection to a Private Water Supply

1. For applications proposing connection to an existing or proposed (new) private water supply, the following information must be submitted by the applicant prior to drinking water approval:
 - a. The source meets the construction and location requirements of Section 7 and the location must be approved by the Health Officer;
 - b. Results of a constant rate pumping test documenting that the quantity requirements of Section 7 have been met;
 - c. Results of samples showing that that water quality requirement of Section 7 have been met; and
 - d. A private water supply design worksheet completed by a qualified individual.
2. The previous water supply shall be properly decommissioned in accordance with Chapter 173-160 WAC.

E. Replacement Source

1. For any new connection to a public water system, the requirements of Section 6.C. above, must be met.
2. For applications proposing a replacement private water supply for an existing structure, the following information must be submitted by the applicant prior to drinking water approval:
 - a. The source meets the construction and location requirements of Section 7 and the location has been approved by the Health Officer;

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- b. Results of a constant rate pumping test documenting that the quantity requirements of Section 7 have been met;
 - c. Results of samples showing that that water quality requirement of Section 7 have been met;
 - d. A private water supply design worksheet completed by a qualified individual; and
 - e. Written documentation that the structure has been disconnected from the previous water supply.
3. The previous water supply shall be properly decommissioned in accordance with Chapter 173-160 WAC.

F. Land Subdivision and Land Use Review Requirements

- 1. Purpose. The purpose of the following requirements is to ensure that proposed developments, subdivisions, and land use proposals can conform to the current standards and regulations regarding water supply.
- 2. Water Supply Information. Subdivision applications shall identify one of the following types of water supply:
 - a) Private or Two (2) Party Private Wells.
 - (1) To utilize private or two (2) party private wells, each proposed lot shall be equal to, or greater than, one acre in size.
 - (2) The number of lots being proposed must comply with Washington State Department of Ecology water right requirements.
 - (3) Proposed or existing well sites shall be located at least 100 feet from proposed or existing property lines unless otherwise authorized by the Health Officer. To locate a well closer to the property line than the required Table 2 setback, a restrictive covenant shall be obtained, unless otherwise authorized by the Health Officer.
 - b) Connection to an Existing Approved Public Water System.
 - (1) A non-binding letter of water availability from the water system purveyor shall be required at the time of the preliminary subdivision application.

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- (2) For any subdivision that requires water system infrastructure improvement, prior to final subdivision approval, the applicant must provide a letter from the water purveyor stating that the infrastructure improvement has been completed or a developer's agreement has been completed.
 - (3) A binding water availability letter will be required for the issuance of a building permit on any lot within the subdivision.
- c) Connection to a Proposed Public Water System.
- (1) The well site and 100- foot protective radius must be shown on the preliminary subdivision application.
 - (2) A final subdivision approval, BSA approval, or other type of development requiring the direct connection and use of a proposed public water supply, may be approved in lieu of water system final approval if the following conditions and financial agreements are completed to the satisfaction of the Health Officer:
 - a. Health Officer approval of the water system design plan.
 - b. The applicant shall provide a complete and accurate estimate for the water system to be completed in its entirety. Estimates shall be reviewed and accepted by the designer of the water system.
 - c. Once items a. and b. have been completed to the satisfaction of the Health Officer, one of the following financial security agreements shall be provided by the applicant in the amount of 150% of the estimated cost for completion of construction:
 - i. A surety bond in the amount commensurate with improvements remaining to be completed and which secures to the Health District the construction and installation of the improvements.
 - ii. An escrow arrangement which is properly executed between the applicant, lending institution, and the Health District to meet the estimated costs as described in this section for completion of the water system.

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- (3) Prior to approval of a septic system installation permit or final occupancy approval of the residence or structure, the water system shall be installed, the Completion of Construction Report submitted, and final approval of the water system granted by the Health Officer.
- (4) A binding water availability letter will be required for the issuance of a building permit on any lot within the subdivision.
- d) Conditional Use Permit. Persons applying for a Conditional Use Permit shall demonstrate conformance with the applicable water supply requirements of these regulations during the land use review.

SECTION 7. DESIGN AND CONSTRUCTION STANDARDS FOR PRIVATE WATER SUPPLIES

A. General Requirements

- 1. The purpose of the following requirements is to establish the minimum design and construction standards for private drinking water supplies.
- 2. Drinking water shall be supplied by the highest quality source feasible.
- 3. No new or previously unapproved private water supply shall be used without Health Officer approval.

B. Location Requirements. All water supplies shall meet the location requirements as listed in Table 2, below.

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Table 2. Minimum Horizontal Separations for New and Existing⁽¹⁾ Public / Private Water Supplies		
(Distances are in feet)	Drilled Well	Dug Well / Spring Supply / Rainwater Catchment Area
Animal Enclosures ⁽²⁾ and active pastures	100/50	NA/100
Structures	100/5	NA/10
Private driveways	100/10 ⁽³⁾	NA/50
Roads ⁽⁴⁾ [Measured from the edge of the road right of way]		
Private/County	50/25	NA/50
State/Federal	100/50	NA/50
Property Lines ⁽⁵⁾	100/50	NA/100
Sewers, Sewage transport lines	100/50	NA/50
Septic tanks, Sewage Pump Tanks and sewage treatment vessels	100/50	NA/50
Rooftop Runoff Infiltration ⁽⁶⁾	100/50/30	NA/100
Onsite Sewage System Drainfield (Primary or Reserve) ⁽⁷⁾	100/100	NA/100
Cesspools, Privies and other Sewage Disposal Systems	100/100	NA/100
Garbage & Manure Piles	100/50	NA/100
Marine water	100/100	NA/100
Surface Water – Wetlands, unlined ponds, lakes, and streams	100/>50*	NA/>100*
Railroad Tracks	100/50	NA/100
Above & below ground storage of chemicals ⁽⁸⁾	100/100	NA/100
Existing sanitary and abandoned landfills	≥1000	≥1000

* As deemed necessary by the Health Officer.

- (1) An existing public supply shall include both unapproved and approved existing water systems.
- (2) Barns, chicken houses, rabbit hutches, pigpens, livestock sheds, etc.
- (3) For setback reductions less than 10 feet, a physical barrier to prevent vehicular traffic and drainage away from the well location is required
- (4) Road Easements:
 - Existing: Pose no apparent or potential contamination threat to the water source due to proper drainage. Construction material and grading may be allowed within the setback if a waiver is obtained from the Health Officer.
 - Proposed: May be permitted within the above setback if it can be demonstrated to the Health Officer that the topography and the land contours, in addition to proper road drainage, construction material and grading, will not present a contamination threat to the water source.
- (5) Water sources can be located closer to property lines provided recorded covenants have been obtained. Where covenants cannot be obtained, a waiver shall be obtained. In instances where either the property is large enough for the well to be placed 100 feet from property lines and still meet setbacks to on-site sewage systems, the well shall be located to meet this setback from the property line.
- (6) Infiltration facilities on regional/commercial sites shall be placed no closer than 100 feet from public or private drinking water wells, septic tanks or drainfield and springs. Infiltration facilities for non-commercial or non-industrial sites shall maintain a 30-foot setback from a private water supply well, septic tank or drainfield, see the setback requirements of KPHD Ordinance 2008A-01.
- (7) This distance may be increased to as much as 200 feet if a Class B vertical separation waiver has been granted.
- (8) Above and below ground storage of chemicals, including, but not limited to, petroleum products, paint, solvents, herbicides, insecticides, pesticides and non-biodegradable fertilizers.

C. Water Quantity Requirements

1. Source production shall be documented with the results of a constant rate pump test with drawdown and recovery information. A report on the test documenting the pumping rate and water levels must be prepared by a qualified individual and submitted to the Health Officer for review.
2. All sources shall produce a minimum of 400 gallons for a single-family residence or 800 gallons for a private two-party water supply in a 24-hour period.
3. The water supply design flow shall be a minimum of 5 gpm for an individual private water supply and 10 gpm for a private two-party water supply. Well yield shall be demonstrated by a constant rate pumping test for a minimum of one hour. The test shall continue until a minimum of 400 gallons of water has been pumped from the well for an individual private water supply or 800 gallons for a private two-party water supply. For example, a constant-rate pumping test for a single-family residence pumped at 10 gpm would pump 600 gallons in 60 minutes satisfying this requirement. If the source produces less than 7 gpm, a minimum four-hour constant-rate pumping test shall be performed.
4. A minimum four-hour constant-rate pumping test shall be performed if the source is a dug well or spring. Dug wells and springs do not meet criteria for private two-party water supplies.
5. Storage Systems
 - a) In the event the source cannot maintain the minimum design flow requirement, it will be necessary to install a storage reservoir in the amount of 400 gallons, minimum, for an individual private supply and 800 gallons for a private two-party supply. A booster pump capable of producing a minimum of 5 gpm for a single-family residential supply or 10 gpm for a private two-party water supply will be required. For any additional non-residential connections, the maximum instantaneous demand will increase by an additional 5 gpm per connection or as deemed necessary by the Health Officer.
 - b) Plans for the design and construction of the storage system and booster pump shall be submitted on forms provided by the Health Officer for review and approval prior to installation. Storage tanks shall be housed in a secured structure to prevent unpermitted access

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and environmental exposure. Pump curves and total pump head calculations shall be included in the design.

D. Water Quality Requirements

1. A satisfactory bacteriological water sample result collected by a qualified individual, and analyzed by a Washington State accredited laboratory. The sample obtained from the proposed source shall be free of residual chlorine. Bacteriological water sample results will be considered valid for a period of 12 months from the date of collection.
2. A partial inorganic chemical (iron, manganese, nitrate, chloride and conductivity) analysis result collected by a qualified individual, and analyzed by a Washington State accredited laboratory. Partial inorganic chemical results will be considered valid for a period of 36 months from the date of collection.
3. For water supplies with a partial inorganic chemical analysis result on file with the Health District that is greater than 36 months old, an updated nitrate chemical analysis result shall be submitted. Nitrate analysis results will be considered valid for a period of 36 months from the date of collection.
4. Primary contaminants shall conform to the Maximum Contaminant Limit (MCL) specified in Appendix A. If any of the primary parameters tested exceed the MCLs, additional tests will be required. For new wells, if the cause of the contamination cannot be determined and corrected, a new water supply source will be required.
5. If a treatment device is required to meet a primary MCL for an existing source, it shall be designed by a professional engineer. The engineered treatment system plan shall be reviewed and approved by the Health Officer prior to installation. Results of follow-up testing and a Completion of Construction Report shall be submitted to the Health Officer before final approval can be issued.
6. Secondary contaminant exceedances of the applicable MCL will be noted in the water supply approval documentation.
7. The Health Officer may require that other parameters be tested based on vulnerability of the source to known or suspected water quality problems in the area of the proposed water supply.

E. Distribution System Design Requirements

1. Pressure Tank Sizing. Unless a variable frequency drive pump controller is used, the capacity of the pressure tank(s) will be based on the following formula:

One gallon of working storage per one gallon per minute pumping capacity; i.e., a 5-gpm pump will require 5 gallons of working or usable storage which computes to a 19-gallon (total volume) pressure tank.

2. Distribution piping. A minimum one-inch, 160 psi or greater potable water pipe will be required for a single-family residence. A minimum 1-1/2-inch, 160 psi or greater, approved potable water pipe is required for a private two-party water supply. Smaller piping may be allowed provided justification is submitted and approved by the Health Officer.

F. Existing and Proposed Well Requirements

1. Prior to any well construction, the well site shall be approved by the Health Officer through a Building Site Application or Well Site Inspection application. Prior to well construction authorization, the use of the proposed well shall be identified. In instances where the property is large enough for the well to be placed 100 feet from property lines and still meet setbacks to onsite sewage system components, the well shall be located to meet this setback from the property lines unless otherwise authorized by the Health Officer. To locate a well closer to the property line than the required Table 2 setback, a restrictive covenant shall be obtained, unless otherwise authorized by the Health Officer.
2. For any newly constructed well, a copy of the Water Well Report must be submitted to the Health Officer.
3. If the proposed source is an existing well, a site inspection shall be performed by the Health Officer and a Water Well Report, if available, shall be submitted to determine compliance with Chapter 173-160 WAC.
4. Dug wells. A minimum sanitary control area of 100 feet shall be established around the well for protection. The sanitary control area shall be established by covenants recorded to the title of each property that is sited partially or completely within the sanitary control area to protect it in perpetuity.

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5. Minimum lot size requirements for wells located on properties with an onsite sewage system are found in Kitsap County Board of Health Ordinance 2008A-01 *Onsite Sewage System and General Sewage Sanitation Regulations*, or as amended. For wells located on properties served by a sanitary sewer utility, there is no minimum lot size, however, Table 2 setbacks shall be met.

G. Two Party Private Water Supply Requirements

1. The source for any two-party private water supply shall be a drilled well; and
2. Protective covenants for the 50-foot sanitary control area shall be recorded; and
3. A scaled record drawing showing the property parcels or structures served by the water supply shall be on file with the Health District. The drawing shall show the well site, structures, roads, property lines, water lines, septic system components including reserve drainfield areas, and other sources of contamination (animal enclosures, etc.); and
4. For two party private water supplies serving separate property parcels, each property parcel shall be equal to, or greater than, one acre in size.

H. Spring Supply Requirements

1. A water right permit or certificate issued by the Washington State Department of Ecology is required. A water right claim or application does not meet this requirement.
2. The spring supply must meet the setback requirements of Table 2 and be approved by the Health Officer.
3. A minimum sanitary control area of 100 feet shall be established around the source for protection. The sanitary control area shall be established by covenants recorded to the title of each property that is sited partially or completely within the sanitary control area to protect it in perpetuity.
4. The applicant shall submit a plan prepared by a professional engineer, showing how the water supply will be designed to meet the quantity and quality requirements of this section.

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I. Surface Water Supply Requirements

1. A water right permit or certificate issued by the Washington State Department of Ecology is required. A water right claim or application does not meet this requirement.
2. The applicant shall submit a plan prepared by a professional engineer, showing how the water supply will be designed to meet the quantity and quality requirements of this section.
3. A notice to title for an alternative water supply must be recorded to the property title.

J. Rainwater Catchment System Requirements

1. The applicant shall submit a plan prepared by a professional engineer, showing how the water supply will be designed to meet the quantity and quality requirements of this section.
2. The rainwater system plan shall identify a replacement water supply in the event the rainwater system is unable to provide an adequate water supply that meets the quantity and quality requirements.
3. A notice to title for an alternative water supply must be recorded to the property title.

SECTION 8. DESIGN AND CONSTRUCTION STANDARDS FOR PUBLIC WATER SYSTEMS

A. Group B water systems shall be designed in accordance with the requirements of WAC 246-291.

B. Individuals Qualified to Design Group B Public Water Systems

1. Group B Public water systems shall be designed by a professional engineer in accordance with WAC 246-291-120 except Group B water system designers who were certified under Bremerton-Kitsap County Board of Health Ordinance 1999-6, and are in good standing with the Health Officer, may design water systems until their certification lapses.

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2. Water systems designed under this exception shall meet the criteria listed in WAC 246-291-120(4).
- C. Group B water systems shall meet the requirements of WAC 246-291-090.
- D. Group B design approvals shall be in accordance with WAC 246-291-120. Water users' agreements are required to be included with design plan submittals.
- E. Group B water system design approvals expire three (3) years and thirty (30) days from the date of submittal to the Health Officer.
- F. Group B groundwater source approval shall be in accordance with WAC 246-291-125.
- G. Public water system sources shall meet the location requirements as listed in Table 2.
- H. Group B water system intertie requirements shall be in accordance with WAC 246-291-135.
- I. Group B water system planning and disclosure requirements shall be in accordance with WAC 246-291-140.
- J. Group B water quality requirements for groundwater source approval shall be in accordance with WAC 246-291-170.
- K. Group B design and construction standards shall be in accordance with WAC 246-291-200, 246-291-205, 246-291-210, and 246-291-220.
- L. Existing Group B water systems shall meet the requirements of WAC 246-291-280.

**SECTION 9. GROUP B WATER SYSTEM AND PRIVATE WATER SUPPLY
OPERATION AND MANAGEMENT REQUIREMENTS**

- A. Water System User's Agreement. No later than twelve (12) months following the effective date of these regulations, all Group B water systems shall submit a copy of a recorded water user's agreement to the Health District which describes water system ownership and management conditions.

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- B. Water System Contact Information. Owners, operators, or purveyors of Group B water systems shall provide a contact name, contact phone number, contact mailing address, and contact email address to the Health Officer. The contact information shall be kept current and verified on an annual basis. Group B water systems shall notify the Health Officer within 30 days of any change in contact information, ownership change, or management change.

- C. Group B Water System Operating Permit Required. Six (6) months after the effective date of these regulations, no Group B public water system shall operate without an operating permit issued by the Health Officer. A Group B public water supply operating permit shall be issued to a Group B system when all current or past due permit fees have been paid. Group B water systems that are not in compliance with all operating and management requirements or monitoring requirements of these regulations will be issued a conditional operating permit.

- D. Group B public water supply operating permits are valid for one year and shall be renewed annually through the Health Officer on a schedule, and on forms, prescribed by the Health Officer. Group B water systems without a valid permit shall be classified as out of compliance and are subject to administrative or enforcement actions as allowed under these regulations.

- E. Sanitary surveys. Purveyors of Group B water systems shall ensure that sanitary surveys of the water system occur on a periodic basis.

- F. Reinstatement of an Out of Compliance Public Water Systems. Any public water system that is operated without a current public water supply permit or is otherwise in violation of this regulation may be required to have a sanitary survey inspection conducted by the Health Officer before the water system is considered in compliance with this regulation. All current and past public water supply annual permit fees and other fees required by this regulation shall be paid in full before a public water supply permit will be issued. An out of compliance water system shall not be reclassified as in compliance until all fees past due are paid, and all violations have been corrected or are under a Health Officer approved compliance schedule for correction.

- G. Unpaid or Past Due Fees. Unpaid or past due fees shall be limited to a maximum sum of five years of fees, the sum of which shall be calculated from notice and receipt of delivery, or the documented posted notice at the physical location of the Group B system, of past due fees to date.

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- H. Transfer of Permit. A transfer of a Group B public water system permit will be required at the time a public water system is transferred from one public water system owner to another, or whenever the name of the public water system is changed. The purveyor or water system owner shall submit written documentation to the Health Officer within thirty (30) days of any transfer of ownership or change in name of the public water system. At a minimum, the information provided shall include the names, addresses, and telephone numbers of the new owners and emergency contact persons for the public water system.
- I. Financial Viability. The water system shall maintain financial viability through the collection of funds sufficient to maintain and operate the water system under normal demand and reasonable emergency repair conditions.
- J. Conditions of approval. The water system shall remain in compliance with the requirements of this regulation, all original conditions of approval, and/or subsequent amended approval conditions. Water systems failing to maintain the conditions of approval, or have an identified significant deficiency shall be deemed an out of compliance water supply, and are subject to enforcement measures provided for in Section 12 of these regulations.
- K. Reporting of Monitoring Results. Unsatisfactory bacteria test results and chemical MCL violations shall be reported, by the certified testing laboratory and the water system, to the Health Officer within 24 hours of completing the testing method or receiving the test results.
- L. Complaints. Pursuant to RCW 43.20.240 complaints regarding the operation, maintenance, water quality or water quantity shall be corrected within a reasonable time frame to protect public health. The water system owner or purveyor shall confer with Health Officer to establish a timeline and plan of action to resolve complaints.
- M. Water System Maintenance. For those water systems under the jurisdiction of the Health Officer, amendments to approved water system designs shall be developed and submitted in accordance with Section 8 of these regulations. Exceptions to this requirement will be made for routine maintenance and emergency repairs.
- N. Health Officer Sample Collection. For public water systems under the jurisdiction of the Health Officer that fail to perform the required bacteriological or nitrate analysis within six (6) months after the due date of the analysis, the Health Officer may sample and perform any required analyses, after adequate

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notice is provided, and charge a fee for service in accordance with the fees established by the Health Board. The water system shall be classified as out of compliance until the fee is paid in full.

- O. Additional Monitoring. Additional physical, chemical, or biological tests may be performed by the Health Officer, after adequate notice is provided, due to the lack of action by the water system owner or manager, or in the event of an actual or suspected contaminated water supply. The Health Office may charge a fee for such service in accordance with the current fee schedule established by the Health Board. The water system shall be classified as out of compliance until the fee is paid in full.

- P. Notice to Title. After adequate notice, the Health Officer may record a notice to title on each of the properties served by the water system, indicating that the property is served by an out of compliance water system if the system fails to meet the requirements of this regulation. Recording costs to extinguish the notice to title will be the responsibility of the property owner served by the water system. The water system shall be classified as out of compliance until the fee is paid in full.

- Q. Satellite Management Agency (SMA) Requirements
 - 1. All Group B public water systems approved after July 22, 1995, shall be managed and operated by an approved SMA. Water systems may be owned, or managed and operated by an approved Group A water system if located within the Group A water system service area.

 - 2. Satellite Management Agency Contracts. When required, a copy of the contract between the water system owner and SMA shall be submitted to the Health Officer for review and approval. Water systems whose SMA contracts lapse, expire, or are no longer in affect will be determined to be in violation of this chapter and deemed an out of compliance water supply.

 - 3. Existing public water systems under the jurisdiction of the Health Board with ongoing operational, managerial, and/or water quality problems that pose a threat to public health may be required to be managed and operated by an SMA or be subject to receivership pursuant to RCW 43.70, and Kitsap County's Coordinated Water System Plan. These problems may include but not be limited to the following.
 - a. Documented ongoing funding problems that cause the water system to fall out of compliance with state and local drinking water regulations.

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- b. Documented ongoing water system infrastructure problems that result in any of the following: loss of water, inadequate water pressure, or significant delays in the replacement of parts critical to the proper operation of the water system which is meant to prevent adverse impacts to public health.
- c. Documented ongoing poor operation and management of the water system to include, but not be limited to:
 - 1. Failure to collect water quality samples; or
 - 2. Failure to address ongoing water quality problems; or
 - 3. Failure to repair system leaks, cross connections, or other system problems that would potentially cause pathogens to enter into the water system.

R. Reliability and Continuity of Service

- 1. All public water systems shall provide an adequate quantity and quality of water in a reliable manner at all times.
- 2. No person shall store chemicals or other pollutants in an approved sanitary control area of a public water supply source.
- 3. In determining whether a proposed public water system or an expansion or modification of an existing system can provide an adequate quantity of water, the Health Officer shall consider the immediate as well as the reasonably anticipated future needs of the system's consumers.
- 4. In determining whether an existing public water system is providing an adequate quantity of water, the Health Officer shall consider the needs of the system's existing consumers exclusively, unless, in the Health Officer's discretion, consideration of the needs of potential consumers is in the public interest.
- 5. The purveyor shall ensure the system is constructed, operated and maintained to protect against failures of the power supply, treatment process, equipment, or structure with appropriate back-up facilities. Security measures shall be employed to assure the water source, water treatment

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processes, water storage facilities and the distribution system are under the strict control of the purveyor.

6. Water pressure at the customer's service meter, or property line if a meter is not used, shall be maintained at the approved design pressure under peak hourly design flow conditions. In no case shall the pressure be less than thirty (30) psi (for systems built in 1982 or later) unless under fire flow conditions at which time the pressure shall not be less than twenty (20) psi.
 7. Water use restrictions as a designed operation practice shall not be allowed.
 8. No intake or other connection shall be maintained between a public water system and a source of water not approved by the Health Officer.
 9. A purveyor shall provide the Health Officer with the current names, addresses and telephone numbers of the owners, operators and emergency contact persons for the system, including any changes to this information. The purveyor shall also maintain twenty-four-hour phone availability and shall respond to customer concerns and service complaints in a timely manner.
 10. Provisions shall be planned for continuity of water service to the customers during any change in or transfer of utility or managerial responsibilities. No purveyor shall end utility operations without providing written notice to all customers and the Health District at least one year prior to termination of service and shall comply with all other requirements specified in WAC 246-291-250.
- S. Responsibilities and Requirements for Owners Conveying Property. Within six (6) months of the effective date of these regulations, owners of property served by a Group B water system or private water supply that intend to convey ownership of the property shall submit an application to the Health Officer, at least 30 days prior property transfer, to request a written evaluation and disclosure of the water supply's functionality and compliance status with respect to applicable regulations, permits, and conditions of approval, according to the following:
1. For a private water supply or Group B public water system, the owner or their authorized agent shall:
 - a. Submit a completed "Water Status Report" application form to the Health Officer; and

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- b. Provide a satisfactory bacteriological water sample result collected by a qualified individual, and analyzed by a Washington State accredited laboratory. The sample obtained from the water supply shall be free of residual chlorine. The sample must be collected from within the last twelve (12) months prior to the application; and
 - c. Provide a nitrate chemical analysis collected by a qualified individual, and analyzed by a Washington State accredited laboratory. The sample must be collected from within the last thirty-six (36) months prior to the application; and
 - d. Allow Health Officer inspection and evaluation of the drinking water supply or system; and
 - e. Provide information about any other wells or water supplies located on or serving the subject property; and
 - f. Provide the Health Officer's written evaluation of the drinking water supply or system to the buyer, or receiver, of the property prior to property transfer.
2. Upon receipt of a completed "Water Status Report" application form and applicable inspection and monitoring reports, the Health Officer shall, within seven (7) business days of receipt of the application:
 - a. Conduct a search and review of available records for the subject water supply or system; and
 - b. Evaluate and determine if the drinking water supply is in compliance with the applicable regulations in effect at the time the system was approved, or believed to be constructed, and any ongoing management requirements for the water system or supply; and
 - c. Issue the written summary and evaluation report to the applicant.
3. Items of Non-Compliance that Require Immediate Correction. If identified during the records review and/or site evaluation, the Health Officer shall notify and require correction, by the owner/purveyor, of any of the following items pursuant to the requirements of this Regulation:

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- a. Significant deficiencies with the water supply or components thereof, that pose a threat to public health or the continued functionality of the system.
 - b. Use or operation of the drinking water system in violation of its approved use or design capacity.
 - c. Current monitoring results for either a private water supply or public water system.
 - d. A Group B public water system without a current operating permit.
 - e. Outstanding permit fees.
4. Other Items of Non-Compliance. Items of non-compliance that do not pose an immediate threat to public health or fall under the criteria described in Section 9.R.3., above, shall be noted by the Health Officer on the evaluation report. It is the intent of these regulations that any of these other items of non-compliance be addressed and corrected in good faith by the current property owner and/or the prospective property owner through the property conveyance process.
 5. Following the legal correction of items of non-compliance, and verification of correction by the Health Officer, the owner or applicant may submit an application for an amended water status report.
 6. Period of Validity. Health Officer water status reports required under this section are valid for the one year from the date of the last evaluation report issued, regardless of how often the property is conveyed during such period.

SECTION 10. GROUP B WATER SYSTEM MONITORING REQUIREMENTS

- A. The requirements of WAC 246-291-300 and 246-291-360, or as amended by the State Board of Health, are hereby adopted by reference.
- B. Monitoring Requirements
 1. Routine drinking water samples and all other samples shall be collected by the water system purveyor, their authorized representative, or other qualified individual.

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2. Group B water systems shall obtain a minimum of one routine bacteriological monitoring sample once every 12 months, unless an increased frequency is required by the Health Officer. Monitoring samples shall be collected from the distribution system or as directed by the Health Officer.
3. Group B water systems shall obtain a nitrate monitoring sample from each source or well field every 36 months, unless an increased frequency is required by the Health Officer.
4. Group B water systems shall monitor for other substances as directed by the Health Officer.

C. Maximum Contaminant Level (MCL) Violations and Follow-up Action

1. Group B water systems shall comply with the standards of water quality identified in Appendix A. If any substance exceeds its MCL, the purveyor shall ensure follow up action is taken as described in these regulations.
2. When a primary chemical MCL violation occurs, the purveyor of a Group B water system shall ensure the following action is taken:
 - a. Notify the Health District within twenty-four (24) hours; and
 - b. Notify the water system users within twenty-four (24) hours; and
 - c. Determine the cause of contamination; and
 - d. Take corrective action, which may include the installation of treatment, as directed by the Health Officer.
 - e. The Health Officer may require additional monitoring for confirmation of results.
3. When a primary chemical MCL violation occurs, the Health Officer may require an increased frequency for monitoring and/or installation of a water treatment device designed by a professional engineer.

D. Bacteriological MCL Violations and Follow-up Action

1. Repeat Samples. When a routine coliform monitoring sample is unsatisfactory, the purveyor shall ensure collection and submittal of a set of two (2) repeat samples within five (5) days of receiving notification of

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unsatisfactory results. One sample shall be taken from the source, if feasible, and the other from another point in the distribution system. A chlorine residual result shall be provided with any repeat sample.

2. Coliform Violation. For repeat samples with the presence of *E.Coli*, or if coliform bacteria are found in a follow up sample to an *E. Coli* positive routine sample, the purveyor shall complete the following actions:
 - a. Notify the Health Officer within twenty-four (24) hours; and
 - b. Provide a boil water notice, either in writing or by telephone, to water system users within twenty-four (24) hours; and
 - c. Perform an assessment to determine the source of the contamination.
 - d. Following any corrective action, an additional set of two (2) compliance samples shall be collected within five (5) days, both samples in a set of repeats shall test satisfactory to obtain water system compliance and return to the annual monitoring frequency, or other monitoring frequency established by the Health Officer. One sample shall be taken from the source, and the other from another point in the distribution system. A chlorine residual result shall be provided with any repeat sample.
 3. For coliform violations, the Health Officer may issue a Boil Water Notice to the water system. When circumstances dictate a broader and/or more immediate notice be given to protect public health, the Health Officer may require notification by whatever means necessary.
 4. In the event disinfection is required of a Group B water system due to repairs, improvements, or an MCL violation, it shall be the responsibility of the purveyor or authorized representative to provide notification, either in writing or by telephone, to each user on the system, 24 hours prior to disinfection taking place.
- E. Secondary MCL Violation. In the event that monitoring sample shows a violation of the secondary MCLs or secondary physical characteristics as listed in WAC 246-291-170, the purveyor of a Group B water system shall notify the Health Officer within 30 days and take corrective action as directed the Health Officer.
- F. The Health Officer shall determine the follow-up action for a Group B water system for substances not included in WAC 246-290 or WAC 246-291.

SECTION 11. WAIVERS

A. Purpose and Intent

1. The purpose of this section of these regulations is to provide a means for owners, or their agents, to:
 - a. Identify the applicable section(s) of these regulations that their project proposal cannot meet due to site specific conditions;
 - b. Explain why the project proposal cannot meet the regulations;
 - c. Propose mitigation measures for the regulation(s) that cannot be met; and
 - d. Justify why, and how, the proposed mitigation will meet the intent of the regulation(s) and protect public health.
2. It is the intent of this section of these regulations to protect public health and to meet, or exceed, the minimum requirements of these regulations as justification for a waiver request.
3. It is not the intent of this section to provide a means to subvert, or bypass, these regulations when they can reasonably be met.

B. General and Application Requirements

1. The Health Officer may grant a waiver to these regulations, or to the requirements of WAC 246-291, if:
 - a. The waiver request is evaluated by the Health Officer on an individual, site-by-site, application-specific basis; and
 - b. The Health Officer determines that the waiver application is consistent with the standards in, and the intent of, these regulations and WAC 246-291.
2. Waiver requests shall be submitted to the Health Officer on forms, and with fees, specified by the Health Officer and shall generally be included with a Building Site Application, Building Clearance Application, Well Site Inspection Application, or Water System Design Plan.

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3. Waiver applications shall be valid concurrent with the timelines applicable to the Building Site Application, Building Clearance Application, Well Site Inspection, or water system design plan that it has been submitted with. Waiver requests shall not be transferable to other applications.
4. Well setback waiver justification may include, but is not limited to:
 - a. A water well report of the well in question or of the nearest well of similar depth or anticipated depth.
 - b. Accumulated depth of impermeable strata that the well penetrates.
 - c. The presence of a bentonite surface seal.
 - d. The slope and direction of drainage and whether it is away from the well, toward any potential source of contamination or vice versa.
5. When a waiver to protective covenant(s) is sought, the applicant will show that reasonable effort has been made to attain the required covenant(s). Final determination of whether a reasonable effort has been made will be at the discretion of the Health Officer. Reasonable effort may include, but is not limited to: written denial by the affected adjacent property owner(s) or returned receipt of certified mail indicating lack of response to the request.
6. No waiver shall be granted which would in any way tend to jeopardize the public health, safety, welfare or in any way tend to interfere with or prejudice the rights of others to the comfortable enjoyment of life and property. No waiver shall be granted which would authorize design and installation contrary to the laws of the State of Washington, including Chapter 246-290 WAC and Chapter 246-291 WAC, as now or hereafter amended.
7. The Health Officer shall deny waiver requests when:
 - a. Adequate mitigation and justification has not been provided to demonstrate that the intent of these regulations can still be met if the waiver request is approved;
 - b. Sufficient explanation has not been provided as to why the regulations cannot be met in full; and/or
 - c. The waiver request is incomplete or incorrect.

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8. When the Health Officer has denied a specific waiver request, the applicant may resubmit another waiver request in accordance with the requirements of these regulations.

SECTION 12. ENFORCEMENT

A. Right of Entry

1. Whenever necessary to inspect to enforce or determine compliance with the provisions of these regulations, and other relevant laws and regulations, or whenever the Health Officer has cause to believe that a violation of these regulations has or is being committed, the Health Officer may, in accordance with federal and state law, seek entry of any building, structure, property, or portion thereof, at reasonable times to inspect the same.
2. Prior to entering any building, structure, property, or portion thereof, the Health Officer shall attempt to secure the consent of the owner, occupant, or other person having apparent charge, or control, of said building, structure, property, or portion thereof.
 - a) In attempting to contact the owner, occupier, or other persons having apparent control of said building, structure, property, or portion thereof, the Health Officer may approach said building or structure by a recognizable access route leading to said building or structure.
 - b) If such building, structure, property, or portion thereof is occupied, the Health Officer shall present identification credentials, state the reason for the inspection, and request entry.
3. If consent to enter said building, structure, property, or portion thereof is not provided by the owner, occupier, or other persons having apparent control of said building, structure, property, or portion thereof, the Health Officer may enter said building, structure, property, or portion thereof only to the extent permitted by federal and state law.
4. If consent to enter said building, structure, property, or portion thereof is not provided by the owner, occupier, or other persons having apparent control of said building, structure, property, or portion thereof, the Health Officer shall also have recourse to any other remedies provided by law to secure entry, including but not limited to search warrants.

B. Violations, Notice, Remedies, and Penalties

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1. Violations

- a) Violations of these regulations may be addressed through the remedies and penalties provided in this section.
- b) Each violation of these regulations shall be a separate and distinct offense and in the case of a continuing violation, each day's continuance shall be a separate and distinct violation.
- c) The Health Officer may investigate alleged or apparent violations of these regulations. Upon request of the Health Officer, the person allegedly or apparently in violation of these regulations shall provide information identifying themselves.

2. Notice and Order to Correct Violation

- a) Issuance. Whenever the Health Officer determines that a violation of these regulations has occurred or is occurring, they may issue a written notice and order to correct violation to the property owner, or to any person causing, allowing, or participating in the violation.
- b) Content. The notice and order to correct violation shall contain:
 - (1) The name and address of the property owner or other persons to whom the notice and order to correct violation is directed;
 - (2) The street address, tax assessor account number, or other description for identification of the building, structure, or land upon or within which the violation has occurred or is occurring;
 - (3) A description of the violation and a reference to that provision of these regulations which has been, or is being, violated;
 - (4) A statement of the action, or actions, required to be taken to correct the violation and a date or time by which the correction is to be completed;
 - (5) A statement that each violation of this regulation shall be a separate and distinct offense, and in the case of a continuing violation that each day's continuance shall be a separate and distinct violation;
 - (6) A statement that the failure to obey this notice may result in the issuance of a notice of civil infraction, and/or the assessment of an administrative remedy, and/or, if applicable, the imposition of criminal penalties; and

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- (7) A statement that the person to whom the notice and order is directed can appeal the order to the Health Officer in accordance with the appeal procedures of these regulations.
- c) Receipts and/or Reports of Corrective Actions Completed. The notice and order to correct violation may also include a statement requiring the person to whom the notice and order to correct violation is directed to produce receipts and/or reports to demonstrate compliance with an order issued by the Health Officer.
- d) Service of Order. The notice and order to correct violation shall be served upon the person to whom it is directed, either personally, via electronic mail, physical posting, or by mailing a copy of the order by first class and/or certified mail postage prepaid, return receipt requested, to such person at his/her last known address.
- e) Extension. Upon written request received prior to the correction date or time, the Health Officer may extend the date set for corrections for good cause. The Health Officer may consider completed or proposed mitigation measures, substantial completion of the necessary correction, and/or unforeseeable circumstances that render completion of correction impossible by the date or time established as a good cause.
- f) Supplemental Order to Correct Violation. The Health Officer may at any time add to, rescind in part, or otherwise modify a notice and order to correct violation. The supplemental order shall be governed by the same procedures applicable to all notice and order to correct violations procedures contained in these regulations.
- g) Enforcement of Order. If, after order is duly issued by the Health Officer, the person to whom such order is directed fails, neglects, or refuses to obey such order, the Health Officer may:
- (1) Utilize any remedy or penalty specified within these regulations;
and/or
 - (2) Abate the health violation using the procedures of these regulations;
and/or
 - (3) Pursue any other appropriate remedy at law or equity.

3. Remedies

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- a) Written Assurance of Discontinuance. The Health Officer may accept a written assurance of discontinuance of any act in violation of these regulations from any person who has engaged in such act. Failure to comply with the written assurance of discontinuance shall be a further violation of these regulations.

- b) Written Voluntary Correction Agreement/Compliance Schedule.
 - (1) The Health Officer may accept a written voluntary correction agreement/compliance schedule to attempt to secure voluntary correction of the violation from the person committing, or responsible for, the violation. Failure to comply with the written voluntary correction agreement/compliance schedule shall be a further violation of these regulations.
 - (2) The written voluntary correction agreement/compliance schedule is a contract between the Health Officer and the persons responsible for the violation in which such person agrees to abate the alleged violation within a specified time frame and according to specific conditions.
 - (3) The written voluntary correction agreement/compliance schedule will be in lieu of the issuance of further citations, or other actions as allowed by these regulations, so long as the written voluntary correction agreement/compliance schedule is adhered to as determined by the Health Officer.
 - (4) By entering into a written voluntary correction agreement/compliance schedule, the person responsible for the alleged violation shall waive the right to a hearing before the Health Officer under these regulations or otherwise, regarding the alleged violation.
 - (5) The Health Officer may grant an extension in time, or a modification in the terms, of the agreement if the person responsible for the alleged violation has shown progress towards correction of the violation and no threat to public health is determined to exist.
 - (6) The Health officer may abate the alleged violation in accordance with these regulations if all the terms of the written voluntary correction agreement/compliance schedule are not met, except that the person responsible for the violation shall not have the right to appeal the abatement order.

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- (7) If all the terms of the written voluntary correction agreement/compliance schedule are not met, the person responsible for the alleged violation shall be assessed all costs and expenses of abatement, as set forth in these regulations.
- (8) Content. The written voluntary correction agreement/compliance schedule shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, assessor's tax identification number, or other description sufficient for identification of the building, structure, premises, or land upon which, or within, the alleged violation has occurred or is occurring;
 - (c) A description of the alleged violation and a reference to the regulation that has been violated;
 - (d) The specific actions to be taken, and a date or time by which each action shall be completed;
 - (e) An agreement by the responsible person that the Health Officer may enter the property, building, structure, or premises and inspect as necessary to determine compliance with the written voluntary correction agreement/compliance schedule;
 - (f) An agreement by the responsible person that the Health Officer may enter the property, building, structure, or premises to abate the violation and recover its costs and expenses from the responsible person if the terms of the written voluntary correction agreement/compliance schedule are not satisfied; and
 - (g) An agreement that by entering into the written voluntary correction agreement/compliance schedule, the responsible person waives the right to a hearing before the Health Officer under these regulations or otherwise, regarding the matter of the alleged violation and/or required corrective action(s).
- c) Stop Work Orders. The Health Officer may cause a Stop Work order to be issued whenever the Health Officer has reason to believe that a violation of this regulation is occurring. The effect of the Stop Work order shall be to require the immediate cessation of such work or activity that has

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contributed to the violation until such time that the Health Officer has removed the order.

(1) Content. A Stop Work order shall include the following:

- (a) The name and address of the property owner or other persons to whom the notice and order to correct violation is directed;
- (b) The street address, tax assessor account number, or other description for identification of the building, structure, or land upon or within which the violation has occurred or is occurring;
- (c) A description of the violation and a reference to that provision of these regulations which has been, or is being, violated;
- (d) A statement of the action, or actions, required to be taken to correct the violation and a date or time by which the correction is to be completed;
- (e) A statement that each violation of this regulation shall be a separate and distinct offense, and in the case of a continuing violation that each day's continuance shall be a separate and distinct violation;
- (f) A statement that the failure to obey this notice may result in the issuance of a notice of civil infraction, and/or the assessment of an administrative remedy, and/or, if applicable, the imposition of criminal penalties; and
- (g) A statement that the person to whom the Stop Work order is directed can appeal the order to the Health Officer in accordance with the appeal procedures of these regulations.
- (h) Service of Order. The Health Officer shall serve the Stop Work order upon the property owner of the property where the alleged violation occurred or is occurring, or to any person causing, allowing, or participating in the violation, either personally or by mailing a copy of the notice by regular and/or certified mail, to the violator at their last known address. A copy of the order shall also be posted on the property where the alleged violation occurred, or is occurring.

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- (i) Posting of Order. In addition to the service of order as described above, an additional notice shall be posted on the property in substantially the following form:

Under the authority of the Kitsap Public Health Board Ordinance 2018-01, *Drinking Water Supply Regulations*, you are hereby required to immediately

STOP WORK

This order is in effect at this property for all work and activities that relate to violations of Kitsap Public Health Board Ordinance 2018-01, *Drinking Water Supply Regulations*, and remains in effect until removed by the Health Officer. It is a violation of these regulations to remove, deface, destroy, or conceal a posted Stop Work Order. **FAILURE TO COMPLY WITH THIS ORDER MAY RESULT IN THE ISSUANCE OF A CIVIL INFRACTION.**

- d) Abatement Orders.

- (1) When the Health Officer has determined that a violation of these regulations has occurred or is occurring, or a public nuisance exists, in accordance with RCW 7.48, they may issue an abatement order to the person responsible for the alleged violation. The abatement order shall require the responsible person to abate the violation or public nuisance within a reasonable period of time as determined by the Health Officer.
- (2) If the abatement order is not commenced or complied with within the specified time period, the Health Officer may proceed to abate the violation and cause work to be done in this regard.
- (3) Absent conditions that pose an immediate threat to the public's health, safety, or welfare, abatement orders shall be utilized by the Health Officer only after the civil penalties process under these regulations has been attempted as a means to correct the alleged violations, but the violations have not been adequately corrected as determined by the Health Officer.
- (4) Content. The abatement order shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, assessor's tax identification number, or other description sufficient for identification of the building, structure,

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premises, or land upon which, or within, the alleged violation has occurred or is occurring;

- (c) A description of the alleged violation and a reference to the regulation that has been violated;
- (d) The specific actions to be taken, and a date or time by which each action shall be completed;
- (e) A statement that the costs and expenses incurred by the Health Officer, pursuant to these regulations, may be assessed against a person to whom the abatement order is directed; and
- (f) A statement that the person to whom the abatement order is directed can appeal the abatement order to the Health Officer in accordance with these regulations.

(5) Service of Order

- (a) The Health Officer shall serve the abatement order upon the owner of the property where the alleged violation occurred, or is occurring, either personally or by mailing a copy of the order by regular and/or certified or registered mail, with a five (5)-day return receipt requested, to the owner at their last known address.
- (b) The order shall also be served on each of the following if known to the Health Officer or disclosed from public records:
 - (c) The holder of any mortgage or deed of trust or other lien or encumbrance of record;
 - (d) The owner or holder of any lease of record and the holder of any other estate or legal interest of record in, or to, the property or any structures on the property.
- (e) The failure of the Health Officer to serve any person as required herein shall not invalidate any proceedings hereunder as to any other person duly or relieve any such person from any duty or obligation imposed by the provision of this section.
- (f) A copy of the abatement order shall also be posted on the property where the alleged violation occurred or is occurring.

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- (6) Authorized Action by the Health Officer. Using any lawful means, the Health Officer may enter the subject property and may remove or correct the condition that is subject to the abatement.
 - (7) Recovery of Costs and Expenses. The costs of correcting a condition which constitutes a violation of these regulations, including all incidental expenses, shall be billed to the owner of the property upon which the alleged violation occurred or is occurring, and shall become due within 30 calendar days of the date of mailing the billing for abatement.
 - (8) Collection of Costs and Expenses. The costs and expenses of correcting a condition, which constitutes a violation of these regulations, shall constitute a personal obligation of the person to whom the abatement order was/is directed. The Health Officer shall send, within 15 days of abating the violation, to the person named in the abatement order a bill that details the work performed, materials used or removed, labor used, and the costs and expenses related to those tasks as well as any other costs and expenses incurred in abating the violation.
- e) Notice to Vacate. When a condition constitutes a violation of these regulations and poses an immediate threat to health, safety, or property of the public or persons residing on the property, the Health Officer may issue a notice to vacate.
- (1) Content. A notice to vacate shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, tax assessor account number, or description sufficient for identification of the building, structure, premises, or land upon which the alleged violation has occurred or is occurring;
 - (c) A description of the violation constituting an immediate threat to health, safety, or property of the public or persons residing on the property and a reference to the provision of these regulations that is being violated;
 - (d) A date, determined by the Health Officer and commensurate with the severity of violation and threat to public health, by which any persons shall vacate the premises in order to mitigate/eliminate the

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violation. In cases of an extreme threat to health or safety to persons or property, immediate vacation of the premises may be required;

- (e) The corrective actions required to be completed prior to re-occupancy of the premises; and a statement that the person to whom the notice to vacate is directed can appeal the order to the Health Officer in accordance with these regulations.
- (2) Service of Notice. The Health Officer shall serve the notice to vacate order upon the owner of the property, where the alleged violation occurred or is occurring, or the person responsible for the alleged violation, either personally or by mailing a copy of the notice by regular and/or certified mail, to said person at their last known address.
- (3) Posting of Notice. In addition to providing service of notice as described above, notice shall also be posted conspicuously on the property where the alleged violation occurred or is occurring.
- (4) Compliance. No person shall remain in or enter any building, structure, or property which has been posted for vacation except to make the specified corrective actions listed in the notice to vacate. No person shall remove or deface a vacate notice posting without the permission of the Health Officer. Health Officer review, inspection, and approval of the completed corrective action is required before the vacate order shall be removed.
- f) Other Legal or Equitable Relief. Notwithstanding the existence or use of any other remedy, the Health Officer may seek legal or equitable relief to enjoin any acts or practices or abate any conditions that constitute or will constitute a violation of these regulations, or rules and regulations adopted under them, or any state health law or regulation, or that otherwise threatens public health.
 - g) Notice of Violation or Order - Failure to Respond or Appear. Unless contested or appealed in accordance with these regulations, any notice of violation or order issued by the Health Officer represents a determination that the person to whom the notice or order was issued committed the violation.

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4. Penalties

a) Civil Penalties

- (1) The violation of any provision of these regulations is designated as a Class 1 civil infraction pursuant to RCW 7.80, *Civil Infractions*.
- (2) The Health Officer may issue a notice of civil infraction pursuant to RCW 7.80 if the Health Officer has reasonable cause to believe that the person has violated any provision of these regulations, or has not corrected the violation as required by a written notice and order to correct violation. Civil infractions shall be issued, heard, and determined as described in RCW 7.80, and any applicable court rules.

b) Criminal Penalties

- (1) Except as otherwise provided for in these regulations or under State law, any person violating any provision of these regulations is guilty of a misdemeanor, and upon conviction thereof shall be subject to a fine of not less than twenty-five dollars (\$25), nor more than one-thousand dollars (\$1,000), or to imprisonment in the county jail not to exceed ninety (90) days, or to both fine and imprisonment.
- (2) Any person who fails, neglects, or refuses to comply with an order of the Health Officer to correct a violation of these regulations pursuant to Section 12.B.2. shall be, upon conviction, guilty of a misdemeanor and shall be subject to a fine of not more than one-thousand dollars (\$1,000), or imprisonment in the county jail not to exceed ninety (90) days, or both. The court may also impose restitution.
- (3) Any person who fails, neglects, or refuses to comply with a written assurance of discontinuance or a voluntary correction agreement pursuant to Section 12.B.3. shall be, upon conviction, guilty of a misdemeanor and shall be subject to a fine of not more than one-thousand dollars (\$1,000), or imprisonment in the county jail not to exceed ninety (90) days, or both. The court may also impose restitution.

c) Noncompliance Fees

- (1) Pursuant to the most current Health District fee schedule as adopted by the Health Board, the Health Officer may assess an hourly noncompliance fee to any person who has been found guilty of

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committing a violation of these regulations for Health Officer oversight, review, and/or inspections of a property to determine compliance with its permit, applicable regulations, or correction / compliance dates specified in a notice and order to correct violation, civil infraction, misdemeanor, or court ordered compliance date.

- (2) Whenever a noncompliance fee is assessed by the Health Officer, the fee shall be due and payable 30 days after receipt of the invoice by the violator.

SECTION 13. APPEALS

A. Appeal of Health District Action – Administrative Review Conference with Environmental Health Director.

1. Any person aggrieved by the contents of a notice and order to correct violation issued under this regulation, or by any inspection or enforcement action conducted by the Health District under this regulation, may submit a written request for an Administrative Review Conference with the Environmental Health Director, or their designee. The request shall be submitted on forms designated for use by the Health Officer along with the applicable fee, and shall detail and specify the reason why the appellant is assigning error to the Health District and requesting the action to be reviewed.
2. Timelines for Appeal. A written application for administrative review shall be submitted to the Health Officer within 10 business days of the enforcement action, except for suspensions or revocations of a Health Officer-granted certification. A request for administrative review of a certification suspension or revocation shall be submitted to the Health Officer within five (5) business days of the action. Upon receipt of such request together with hearing fees, the Environmental Health Director shall notify the person of the time, date, and location of such hearing, which shall be set at a mutually convenient time not less than five (5) business days or more than 15 business days from the date the request was received. The Environmental Health Director may extend this timeline, for good cause, for up to an additional 15 days. The Environmental Health Director will issue a written decision concerning the disposition of the administrative review within 10 business days of the conference date, and may require additional actions as part of the decision.
3. A request for administrative review is at the option of the aggrieved person. A request for administrative review shall in effect constitute a stay of the

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appeal process for the Health Officer Administrative Hearing and preserve all rights and timelines associated with the appeal process. The timelines for appeal shall become effective upon issuance of the written decision from the administrative review conference.

B. Appeal of Health District Action – Health Officer Administrative Hearing.

1. Any person aggrieved by the contents of a notice and order to correct violation issued under this regulation, or by any inspection or enforcement action conducted by the Health District under this regulation, may submit a written request for a hearing before the Health Officer, or their designee. The request shall be submitted on forms designated for use by the Health Officer along with the applicable fee, and shall detail and specify the reason why the appellant is assigning error to the Health District action being appealed.
2. Timelines for Appeal. A written application for appeal shall be submitted to the Health Officer within 10 business days of the action appealed for all Health District actions, except for suspensions or revocations of a Health Officer-granted certification. An appeal of a certification suspension or revocation shall be submitted to the Health Officer within five (5) business days. Upon receipt of such request together with hearing fees, the Health Officer shall notify the person of the time, date, and location of such hearing, which shall be set at a mutually convenient time not less than five (5) business days or more than 15 business days from the date the request was received. The Health Officer may extend this timeline, for good cause, for up to an additional 15 days. The Health Officer will issue a written decision concerning the disposition of the appeal within 10 business days of the hearing date, and may require additional actions as part of the decision.
3. Incomplete or Untimely Appeals. Incomplete appeal requests, or appeal requests that do not meet the specified timelines for appeal, shall not constitute a legal appeal under these regulations.

C. Appeal of Administrative Hearing Decision –Health Board Hearing.

1. Any person aggrieved by the findings, decision, or required actions of an administrative hearing shall have the right to appeal the matter by requesting a hearing before the Health Board. The appellant shall submit specific statements in writing of the reason why error is assigned to the decision of the Health Officer, and shall be accompanied by the applicable hearing fee. The appellant and the Health Officer may submit additional information to the Health Board for review and consideration.

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2. Timelines for Appeal to Health Board. A written application of appeal shall be presented to the Health Officer within five (5) business days of the findings and actions from the administrative hearing. Upon receipt of a timely written notice of appeal together with hearing fees, the Health Officer shall set a time, date, and location for the requested hearing before the Health Board, and shall give the appellant written notice thereof. Such hearing shall be set at a mutually convenient time not less than five (5) business days or more than 30 business days from the date the appeal request was received by the Health Officer. Any decision of the Health Board shall be final and may be reviewed by an action filed in superior court. Any action to review the Health Board's decision shall be filed within 21 business days of the date of the decision.
 3. Stay of Action. Any orders issued concerning the alleged violation shall remain in effect during the appeal to the Health Board. Any person affected by an order to correct violation may make a written request for a stay of the decision to the Health Officer within five (5) business days of the Health Officer's decision. The Health Officer shall notify the appellant in writing of their decision to grant or deny the stay request within five (5) business days of receipt of the request.
- D. Judicial Review. All decisions of the Health Board shall be final unless review is sought by filing an action in any court of competent jurisdiction, as provided by the laws of this State.

SECTION 14. IMMUNITY FROM LIABILITY

Inspections, rules, and orders of the Health Officer resulting from the exercise of the provisions of these regulations shall not in any manner be deemed to impose liability upon the Health District, or its employees, for any injury or damage resulting from the administration and enforcement of these regulations. All actions of the Health Officer shall be deemed an exercise of the police power of the state.

SECTION 15. SEVERABILITY

Should any part of these rules and regulations be declared unconstitutional or invalid for any reason, such declaration shall not affect the validity of the remainder.

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Appendix A
Maximum Contaminant Limits

Substance	Primary MCLs (mg/L)
Antimony (Sb)	0.006
Arsenic (As)	0.010*
Barium (Ba)	2.0
Beryllium (Be)	0.004
Cadmium (Cd)	0.005
Chromium (Cr)	0.1
Cyanide (CN)	0.2
Fluoride (F)	4.0
Mercury (Hg)	0.002
Nitrate (as N)	10.0
Nitrite (as N)	1.0
Selenium (Se)	0.05
Thallium (Tl)	0.002

Note: *The arsenic MCL in this Appendix applies to new and expanding Group B systems. For Group B systems constructed prior to January 1, 2014, the arsenic MCL is 0.05 mg/L. WAC 246-291-360 (3) and (4) establish public notification requirements for Group B systems constructed prior to January 1, 2014, with an arsenic concentration exceeding 0.010 mg/L.

DRINKING WATER SUPPLY REGULATIONS

An Ordinance Updating Local Drinking Water Supply Regulations and Repealing Ordinance 1999-6

WHEREAS, the Kitsap Public Health Board has the authority and responsibility to supervise all matters pertaining to the preservation of the life and health of the people within its jurisdiction and to enforce through the local health officer or administrative officer the public health statutes of the state and rules promulgated by the state board of health and secretary of health in accordance with Chapter 70.05.060 Revised Code of Washington (RCW); and

WHEREAS, the state has promulgated public health statutes for the construction, modification, or expansion of new or existing public water supplies in RCW 70.05.070 (8) and statutes for the development of safe water wells and decommissioning of unsafe or unused wells in RCW 18.104.043; and

WHEREAS, the state board of health has promulgated rules pertaining to safe drinking water, wells, and public water systems in Chapters 246-290 and 246-291 Washington Administrative Code (WAC) and sections of WAC 246-290 and WAC 246-291 have been modified since adoption of Ordinance 1999-6; and

WHEREAS, RCW 70.05.060 also authorizes the Kitsap Public Health Board to enact such local rules and regulations as are necessary in order to preserve, promote and improve the public health and provide for the enforcement thereof; and

WHEREAS, Kitsap County has over 850 Group B public water systems serving an estimated population of over 10,000 citizens and over 80% of county residents are reliant on ground water for their water supply; and

WHEREAS, Kitsap County Code Chapter 13.06, *Coordinated Water System Plan*, appoints the Kitsap Public Health District to provide water adequacy reviews for building permits, investigate complaints of public water systems, oversee and permit the siting and construction of private wells, and to maintain records and compliance status for Group B public water systems among other tasks in its pursuit for compliance with RCW 19.27.097 and RCW 43.20.240; and

WHEREAS, public health is protected by ensuring water supplies meet minimum operational and management requirements, and water wells meet proper locational standards; and

WHEREAS, certain sections of existing ordinance 1999-6 are obsolete, need clarification or restructuring.

NOW, THEREFORE, BE IT ORDAINED, that the Kitsap Public Health Board does authorize and approve Ordinance 2018-01, Drinking Water Supply Regulations, as set forth below and hereby incorporated by reference, effective immediately, and until further notice. Bremerton-Kitsap County Board of Health Ordinance 1999-6, Rules and Regulations Governing Private and Public Water Supplies, May 1, 1999, is hereby repealed.

APPROVED: September 4, 2018

Mayor Becky Erickson, Chair
Kitsap Public Health Board

Kitsap Public Health District
Summary of Comments Received for Proposed Drinking Water Supply Regulations (updated June 2018)

–	Against ordinance
+	Supports ordinance
/	Position unknown or not stated
+ (*)	Was against ordinance initially; now in support

Total number of comments: 41 comments received (35 prior to public hearing; 6 after hearing)

Number of Group B water systems represented by comments: 28 systems (3% of 857 total)

Total against: 28 comments

Total support: 11 comments

Total not stated: 2 comments

Kitsap Public Health District
Summary of Comments Received for Proposed Drinking Water Supply Regulations (updated June 2018)

Date	Feedback submission details	Name	Water System (if known)	+/-	Issues
5/3/18	Email /web submission	Alan Westphal	Springwood #1	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • Fees should only be paid by non-compliant systems • Enforcement should be done on non-compliant systems • No evidence of public health issues
5/3/18	Email /web submission	George Hart	H.R.S.	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • Why are realtors allowed to take water samples?
5/4/18	Email /web submission	Douglas Janachek	Walker Beach	+ (*)	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • Fee structure not equitable – private wells not required to pay
5/4/18	Email /web submission	Tom Hornburg	Cool	+ (*)	<ul style="list-style-type: none"> • Fees should only be paid by non-compliant system • Objects to in-compliance systems subsidizing out-of-compliance systems • Fee structure not equitable (same fee for big or small system) • Requested clarification on ordinance fees
5/4/18	Email /web submission	Stan Gacioch	Amis	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • Fee structure not equitable (same fee for big or small system)
5/4/18	Email /web submission Attended/spoke at 5/7 listening session	Tim Ferris	Thompson	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • Fees should only be paid by non-compliant systems • Group B wells are private not public
5/3/18	Email /web submission	Pat Neumann	Olalla Grange	/	<ul style="list-style-type: none"> • Requested clarification on inspection requirement and fees specific to Olalla Grange.
5/4/18	Email /web submission Attended/spoke at 5/7 listening session	Glen Juges	Enetai Beach	+	<ul style="list-style-type: none"> • Strongly in favor of ordinance. • Owners need to be aware of the water quality in their system • Overdue fees should be required for late or non-payment • WSR fee should be higher • KPHD should not provide service to those systems that do not pay
5/7/18	Attended/spoke at 5/7 listening session	James T. Anderson	Fraser Road	-	<ul style="list-style-type: none"> • The Health District should remove the local mandates requiring this work • Will there be a vote on this? • The Health District should provide technical resources to water systems

Kitsap Public Health District
Summary of Comments Received for Proposed Drinking Water Supply Regulations (updated June 2018)

5/7/18	Attended/spoke at 5/7 listening session	Hailee Zettley	Three Berry Lane	-	<ul style="list-style-type: none"> • Fees should only be paid by non-compliant systems • Why doesn't the public get a vote? • There should not be inspections • Why does the burden only fall on Group B water systems?
5/7/18	Attended/spoke at 5/7 listening session	Carolyn Zimmers	Feather Ridge 1 & Feather Ridge 2	+	<ul style="list-style-type: none"> • In favor of ordinance. • Customers need better information and improved communication from purveyor • Concerns about lack of detail/support concerning ownership determinations
05/07/18	Email /web submission	Jane Brunton	Casey Street	+	<ul style="list-style-type: none"> • Requested summary of changes and clarification on ordinance • Purveyors/owners of water systems need more support/structure to better match the level of responsibility expected
5/7/18	Email /web submission	Wendy Hufnagle	Springwood Lane	-	<ul style="list-style-type: none"> • Objects to / questions about KPHD's hourly rate / cost projections • No evidence of public health issues • Objects to fee/unnecessary regulation / government intrusion or overreach • Wants KPHD to provide more resources • Fee structure not equitable – private wells not required to pay • Only systems out-of-compliance should be fined or pay fees
5/8/18	Email /web submission	K Overfield	Forest Haven #2	-	<ul style="list-style-type: none"> • Requested clarification on Sections 5, 12 and 14 of the new ordinance.
5/8/18	Email /web submission	Michael Overfield	Forest Haven #2	-	<ul style="list-style-type: none"> • Objects to / questions about KPHD's hourly rate / cost projections • KPHD accepts no risk or responsibility
5/8/18	Email /web submission	Anonymous	Unknown	-	<ul style="list-style-type: none"> • Concerned about Sections 5 and 12 • Questions about fees
5/8/18	Email /web submission Attended 5/7 listening session	Robert Ehlers	Private well	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • No evidence of a public health issue • Concerned about lack of notice for and time of public listening session • Water samples already required by mortgage companies at conveyance; additional regulation not needed
5/8/18	Email /web submission	Brad Hofman	Forest Haven #2	-	<ul style="list-style-type: none"> • Does not see significant changes to ordinance from last year • Objects to fee/unnecessary regulation / government intrusion or overreach • Already pays for SMA; shouldn't have to pay additional fees. • Objects to / questions about KPHD's hourly rate / cost projections • Questions why KPHD accepts no risk or responsibility

Kitsap Public Health District
Summary of Comments Received for Proposed Drinking Water Supply Regulations (updated June 2018)

5/8/18	Phone call with John Kiess	Janice Hill	Cole	+	<ul style="list-style-type: none"> Favors the time of sale reporting requirements.
5/8/18	Phone call with John Kiess	Brad Gardner	Private well	+	<ul style="list-style-type: none"> Had questions / requested clarification on ordinance. In support of new regulations.
5/8/18	Email /web submission Attended/spoke at 5/7 listening session	Terry Hubbard	Fraser Road	+ (*)	<ul style="list-style-type: none"> Requested clarification on when a Group B system will be required to hire a Satellite Management Agency.
5/9/18	Email /web submission	Betsy Cooper	League of Women Voters	+	<ul style="list-style-type: none"> In favor of ordinance.
5/9/18	Email /web submission	Robin Gazay	Forest Haven #2	-	<ul style="list-style-type: none"> Objects to fee/unnecessary regulation / government intrusion or overreach Objects to / questions about KPHD's hourly rate / cost projections No evidence of a public health issue Upset that KPHD accepts no risk or responsibility
5/13/18	Email /web submission	Keith Pittman	Private well	+ (*)	<ul style="list-style-type: none"> Concerned about taxation of private wells Was opposed to ordinance initially, responded in support of ordinance after KPHD provided clarification/explanation that ordinance does not include fees or taxes on private wells.
5/14/18	Email /web submission	Lori Johnson	David Sicks	-	<ul style="list-style-type: none"> Objects to fee/unnecessary regulation / government intrusion or overreach
5/14/18	Email /web submission	Anonymous	Unknown	-	<ul style="list-style-type: none"> Objects to fee/unnecessary regulation / government intrusion or overreach or overreach
5/14/18	Email /web submission	Michael Vineyard	Rhododendron Acreage Tract	-	<ul style="list-style-type: none"> Objects to / questions about KPHD's hourly rate / cost projections Only non-compliant systems should pay a fee In-compliance systems or those with SMA should not have to pay KPHD should provide more resources, checklists, etc.
5/16/18	Phone call to John Kiess 5/16/18. Follow-up Email /web submission sent with additional information.	Jason Chase	Broomgerrie	+	<ul style="list-style-type: none"> Requested clarification on what changes were made to ordinance since regulations proposed last year. In favor or ordinance.

Kitsap Public Health District
Summary of Comments Received for Proposed Drinking Water Supply Regulations (updated June 2018)

5/16/18	Email /web submission	J.D. Burbridge	Forest Lane	-	<ul style="list-style-type: none"> • Fees should only be paid by non-compliant systems • Objects to fee/unnecessary regulation / government intrusion or overreach
5/18/18	Email /web submission	Don Dickson	Prince Pine	-	<ul style="list-style-type: none"> • The people who benefit from government services should be the ones to pay for them. • What services are provided for the fees?
5/17/18	Email /web submission	David Ellingson	Virginia Cove	-	<ul style="list-style-type: none"> • Objects to / questions about KPHD's hourly rate / cost projections • Who were stakeholders involved in development of revisions? • Many counties do not have Group B regulations – these are unnecessary. • Fees should only be paid by non-compliant systems • What is included in Water Status Report?
5/17/18	Email /web submission	Kirk Payne	Orseth	-	<ul style="list-style-type: none"> • Fee structure not equitable – private wells not required to pay • Objects to fee/unnecessary regulation / government intrusion or overreach
5/17/18	Email /web submission	Joe Lubischer	Unknown	/	<ul style="list-style-type: none"> • Is there a mark-up of existing ordinance?
5/18/18	Email /web submission	Carolyn Schuster	Unknown	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach
5/19/18	Email /web submission	Maaren Stroble	Hintz	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • Concerned about lack of notice for feedback deadline.
<i>Comments received after public hearing, during extended public comment period (June 5 – June 12)</i>					
6/5/18	Email/web submission	Rick Kuhns	Paulson Road #43786C	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation
6/7/18	Email/web submission	Matt Ryan	Brownsville Water District No. 1 #088856	-	<ul style="list-style-type: none"> • Concerned that ordinance is anti-growth, not pro-public health based on required set-backs. • Regulations do not speak to saltwater intrusion. • Objects to definition of a “qualified individual” for taking water samples.
6/12/18	Email/web submission	David and Marie St. Martin	Joanne Lane Community Club #367748	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • No evidence of public health issues • Lack of funding by County and State indicate that these services are deemed unnecessary

Kitsap Public Health District

Summary of Comments Received for Proposed Drinking Water Supply Regulations (updated June 2018)

6/12/18	Email/web submission	Reid Johnson and Elise Golsan	Hill #AB533D	-	<ul style="list-style-type: none"> • Objects to unnecessary regulation • Concerned that KPHD accepts no risk or responsibility for issues with Group B systems •
6/12/18	Email/web submission	Michael & Cori Donnelly	Hill #AB533D	-	<ul style="list-style-type: none"> • Objects to fee/unnecessary regulation / government intrusion or overreach • No evidence of public health issues •
6/15/18	Email/web submission	Brian Moody	Gen-Don #45453T	-	<ul style="list-style-type: none"> • Questions about what services covered by fee • Objects to fee if KPHD is not taking on the responsibility of water testing

Attachment 3 - Responses to frequently asked questions and concerns for proposed Drinking Water Supply Regulations (May 2018)

Why are updates to the regulations being considered?

Local health regulations to ensure safe drinking water have been in effect since 1991. The current rules overseeing drinking water supplies (Ordinance 1999-6) are out-of-date. The Kitsap Public Health District has been working since 2016 to revise these rules and is recommending adoption of an updated rule by the Kitsap Public Health Board. Local health jurisdictions are responsible for the oversight and administration of Group B public water systems (water systems serving three to 14 residential connections), and the review and approval of private well systems (serving one to two connections), under existing state and local rules and agreements to ensure safe drinking water. Kitsap County has over 850 Group B public water systems. Group A water systems (serving more than 14 connections) are overseen by the State Department of Health.

What are the major changes to the regulations?

Based on public comment and guidance from the Health Board, the most recent draft of the drinking water supply regulations includes the following changes as compared to Ordinance 1999-6 ([click here for a detailed summary](#)):

- Eliminates an existing requirement that all Group B public water systems undergo a complete sanitary survey inspection by the Health District at least once every five years.
- Requires owners of property connected to a Group B public water system or private well to apply to the Health District for a “Water Status Report” only at the time of property sale. A water status report provides information about the drinking water supply and will address any applicable drinking water requirements or concerns. In the past, these reports have been optional, but are now required.
- Requires Group B public water systems to obtain an annual operating permit at \$75.
- Requires each Group B public water system to file a “users agreement” if there is not one already in place. A user’s agreement legally establishes details about the water system’s ownership and management.
- The draft rule does not require owners of 1- or 2-party private wells to obtain an annual operating permit or pay an annual fee.

What changes were made since last year?

Based on the comments we received last year, we made several significant changes to our proposed rule update:

- We **eliminated** the existing requirement that Group B water systems must be inspected (sanitary survey) by the Health District at least once every 5 years. This requirement had been in place since 1999 and was the most expensive element of our past program.
- We **reduced** our proposed annual fee from \$120 down to \$75. If adopted, this fee would raise \$65,000/year to perform the basic administrative services that all Group B systems have been receiving since 1991.

Attachment 3 - Responses to frequently asked questions and concerns for proposed Drinking Water Supply Regulations (May 2018)

What does the annual fee cover? What services are provided for the annual fee?

The proposed fee, of \$75 a year for each Group B water system, would raise \$65,000/year to perform the basic administrative services that all Group B systems have been receiving since 1991:

- water system file maintenance and record keeping --- including the number of approved service connections so that when people apply for building permits we have their water adequacy findings available and accurate;
- service/sampling reminders;
- fulfilling data and public records requests about the water system design and capacity;
- responding to public complaints;
- providing technical assistance during contamination events and boil water alerts;
- entering and tracking water quality data to ensure that people are receiving clean and safe water.

Objections to fees / unnecessary regulation / government intrusion:

The Health District has legal responsibility to perform public Group B water system administration. The Health District has not been able to perform many required functions for the County's 857 Group B systems over the past nine years due to funding cuts at the state level. The purpose of the proposed rule updates is to develop and implement a local system to fulfill these legal responsibilities once again.

Group B water systems will pay a \$75 annual operating fee as part of the proposed regulations. Most Group B water systems are partially owned by each property connected to the system, so the cost would typically be apportioned among the owners. The average Group B water system has four residential connections, so an approximate cost would be \$19 a year. There are no other fees associated with the proposals except when a property conveyance occurs.

Is there a "mark-up" of the existing ordinance? Can we get a summary of changes?

Due to the extensive reformatting of the existing document, we do not have a "mark-up" version available for review. We have prepared a summary of the changes to the ordinance which is posted on our website at: www.kitsappublichealth.org/environment/drinking_water_regs.php

In summary, the primary changes are:

- A new \$75 annual operating permit for Group B water systems.
- Required time of sale reports for properties served by Group B water systems and private water supplies.
- All Group B water systems must develop owner/user agreements.

Where can I find the fee information? Why is the fee not included in the ordinance?

All fees are listed in the Kitsap Public Health Board's fee schedule which is available [online](#). The Group B operating permit fee must be approved with a Board resolution. Therefore, the current fee schedule does not yet include the proposed Group B annual fee (The schedule currently shows "TBD" for #6: Group B public water system annual operating permit).

Attachment 3 - Responses to frequently asked questions and concerns for proposed Drinking Water Supply Regulations (May 2018)

Fees should only be paid by non-complaint systems, or systems requesting assistance:

Proposed permit fees would support the cost of administrating both compliant and non-compliant public Group B water systems. The Health District incurs some costs to administer any public Group B water system – even those in compliance. For those water systems that are out of compliance, additional inspection fees may be required, and additional design review will be required for any water system seeking Health District approval.

The fee structure is not equitable. Why is it the same fee for big or small systems?

The Health District is proposing a “flat” fee structure as the Health District’s administrative level of effort is the same, no matter the size of the Group B water system.

The fee structure is not equitable – why are private wells not required to pay?

Private wells are not legally required to perform the operations and monitoring activities required of Group B water systems and the Health District does not have as many legal mandates requiring a level of service for private water supplies. However, to address the issue of public health protection equity as you mentioned, as part of this regulation the Health District is requiring time of sale water status reports for both Group B water systems and private water supplies, providing more public health protection to all types of water supplies in Kitsap County.

Objections to / questions about KPHD’s hourly rate / cost projections:

The economic analysis information is based on our Kitsap Public Health Board approved fee schedule, and the Health District’s hourly billing rate for 2019 is \$145. The approved hourly rate includes far more than an individual staff member’s wage. You can find more information about the Health District fees in the Kitsap Public Health Board Resolution 2017-03. It is Board of Health policy to collect fees for service where applicable, and fees must be set at a rate not to exceed the actual cost of providing the service.

The cost to perform services for our 857 Group B water systems includes time and expenses such as databases to keep track of all the water system information, staff time to run reports to mail sampling reminder cards, staff time to enter that sampling data into the database and water system file, staff time for responses to failed bacteria samples, and staff time to provide regulatory requirement information and technical guidance for water systems.

These regulations aren’t needed when there is no evidence of a public health issue:

Although the Health District does not have data to show there in an increase in waterborne illness due to out of compliance water systems, local health jurisdictions are mandated by state law to *prevent disease and promote, preserve, and improve public health* (RCW 70.05). Due to state regulatory and funding changes that have occurred over the last decade, the Health District believes that it is falling short of these responsibilities as they relate to drinking water and groundwater protection and preservation. We would accomplish this by re-establishing a Group B water system program that will guide water systems into compliance and assist them with staying in compliance to prevent waterborne illnesses or contamination of groundwater supplies.

Attachment 3 - Responses to frequently asked questions and concerns for proposed Drinking Water Supply Regulations (May 2018)

Group B wells are private not public:

All Group B water systems by law are public water supplies based on Washington State Department of Health rules (WAC 246-291). Water system classification is determined by usage, not ownership. Most Group B water systems are privately-owned, and the proposed annual permit supports the Health District's costs to provide the legally required oversight of these water systems.

Objections to inspection requirements:

The Health District has **eliminated** the existing requirement that Group B water systems must be inspected (sanitary survey) by the Health District at least once every 5 years. This requirement had been in place since 1999 and was the most expensive element of our past program. The only inspections that would be required would be associated with a time of sale water status report for a property connected to a Group B water system or 1- or 2-party private well. (Note: this change was made to the regulations based on public feedback on the revisions proposed in 2017.)

Many counties do not have Group B regulations. Why do we have to have them?

Many local health jurisdictions have not developed a local ordinance, or any fees, and have opted out of managing Group B water systems entirely. Many of those counties have very few systems. Kitsap Public Health does not support this option. With more than 850 Group B systems, Group B Kitsap County has the 4th most Group B water systems in the state. Expected outcomes of eliminating a local program include hindrances for building permit reviews, delays in real estate transactions, unmonitored water systems, and does not address the Health District's legal requirements.

Concerns about lack of notice about proposed ordinance and/or time of public meetings:

We have been working on this ordinance revision for since 2016 and we have contacted every Group B water system on multiple occasions about the proposal since the ordinance was first proposed in the early in 2017.

- The [ordinance information web page](#) has been available since December 2016.
- There was a [Kitsap Sun article](#) about this ordinance revision proposal in March of 2017.
- We currently have 983 subscriptions to our electronic notification system providing updates to the ordinance development process.
- Notifications about the May 7th, 2018 listening session were sent out on April 27th and May 3rd, 2018.
- We held the May 7th public listening session at 5 p.m. to allow people to attend after normal work hours.

Concerns about taxation of private wells:

The Health District has no intention to tax private wells and has no taxing authority to do so. The proposed rules state that at the time of a property sale, the seller of a property that utilizes a private water supply would be required to submit a water status report application to the Health District, so the Health District could prepare a report on the water supply that would then be provided to the purchaser of the property.

Attachment 3 - Responses to frequently asked questions and concerns for proposed Drinking Water Supply Regulations (May 2018)

Concerns about requirement for Group B system to hire a Satellite Management Agency:

The Health District has no intention of requiring water systems to acquire a Satellite Management Agency (SMA) as part of this regulation. Any Group B water system approved since July 1995 is required to have an SMA, but systems approved prior to that date have no legal requirement to have these management entities operate their system.

Who were stakeholders involved in developing regulation changes?

The ordinance development process included soliciting input from stakeholder groups who interact with Group B water systems and have an interest in the outcome. The ordinance was developed with input from Group B water system users/owners, Kitsap County water system managers, the Kitsap County Water Purveyors Association, the Kitsap Builders Association, and the Kitsap Association of Realtors. We have contacted every Group B water system about the proposal, and we currently have 983 subscriptions to our electronic notification system providing updates to the ordinance development process.

Why are realtors allowed to take water samples?

Realtors are one example of a qualified individual to collect water samples for a time of sale water status report. Group B water systems managers are already authorized to collect their own regular monitoring samples, and the Health District does not wish to alter that. Group B water systems collect samples on a regular schedule, so an additional water sample for a time of sale report for a property connected to a Group B water system should not be necessary. If realtors are involved at all, it would most likely be associated with a time of sale report for a private water supply.

Questions about Section 5:

Section 5 of the proposed regulations allows for policy development to augment the regulations without having to rewrite the entire rule. As an example, our onsite sewage system regulations have additional policies about septic tank sizing, minor repairs, etc. For water systems, a typical example would be a more detailed policy about pressure tank replacement.

Questions about Section 12 pertaining to the Health Officer entering homes:

The Health District has no intent to enter homes, nor do we anticipate any need to for a water supply inspection. Please be aware that any enforcement actions by the Health District must follow the rules of law as described in the regulations. If an application is submitted to our office, the applicant is inviting the Health District to visit the property, and any access arrangements (locked gates, desire to accompany the inspector, etc.) are most certainly honored. Health District staff would not be entering any properties without the owner's permission.

Questions about Section 14 pertaining to "immunity of liability" for the Health Officer:

Section 14 is legal language that describes how public officials or agencies cannot be held liable for upholding these regulations. For example, a well owner could not pursue legal action against the Health District for being required to perform the monitoring required in the rule.

Attachment 3 - Responses to frequently asked questions and concerns for proposed Drinking Water Supply Regulations (May 2018)

What is included in a water status report (WSR)?

A water status report will provide a summary of the compliance status of the water supply including its approvals, operating conditions, monitoring data, and any other information of note. The Health District believes that time of sale water status reports for public and private water supplies are an effective method to ensure that water supplies are still in compliance with their conditions of approval, are providing potable water, and avoids unnecessary inspections and fees.

Water samples already required by mortgage companies at conveyance; additional regulation is not needed:

The water sample that many lenders require does not fully address many of the drinking water requirements for a private well or a Group B public water system. There can be conflicts over varying sample results, and the prospective purchaser or lender misunderstanding that a bacteria sample is the only thing required to determine if the water supply is “approved.”

MEMO

To: Kitsap Public Health Board
From: Keith Grellner, Administrator
Date: September 4, 2018
Re: Resolution 2018-04 - Amending Environmental Health Fee Schedule

If the Health Board approves Ordinance 2018-01, Drinking Water Supply Regulations, an amendment to the Environmental Health Fee Schedule will be necessary to include the proposed \$75 annual permit fee for Group B public water systems. If the Health Board does not make a final decision on Ordinance 2018-01 during today's meeting, a fee schedule amendment will not be needed and this agenda item may be tabled until needed.

Please find proposed Resolution 2018-04, Amending Environmental Health Fee Schedule, and an amended fee schedule in **Attachment 1**. The new Group B public water permit fee is on Page 1, Item No. 6 (\$75).

All the other fees in the schedule remain unchanged at this time.

Recommended Action

After a public hearing, the Health Board may wish to make and approve the following motion:

The Board moves to approve Resolution 2018-04, Amending Environmental Health Fee Schedule.

If you have any questions or comments, please contact me at keith.grellner@kitsappublichealth.org or (360) 728-2284.

Attachment (1)

Amending Environmental Health Division Fee Schedule To Include Group B Public Water System Permit Fee

WHEREAS, the Kitsap Public Health Board is empowered by RCW 70.05.060(7) and RCW 70.46.120 to establish and charge fees for issuing or renewing licenses, permits, or for such other services as are authorized by law; and

WHEREAS, Board Budget Policy, Article XI, Budget Administration --- Fees, directs the Kitsap Public Health District to recover the cost of services for fee related activities; and

WHEREAS, a fee schedule has been operative and essential to cover expenses incurred by the Environmental Health Division when conducting and maintaining programs that implement and enforce state public health laws and rules and local ordinances within Kitsap County; and

WHEREAS, the Health Board's approval of Ordinance 2018-01, Drinking Water Supply Regulations, reestablishes required services to be performed by the Health District for administration and technical services for Group B public water systems; and

WHEREAS, the Health District incurs costs for providing administrative and technical services to Group B public water systems on an annual basis and the Health Board wishes to add a Group B public water system fee to cover the costs of these services; and

WHEREAS, the Health Board approved Resolution 2017-03 in December 2017 to keep the Environmental Health Division fee schedule current with annual market increases for years 2020 through 2026 by automatically adjusting fees each January 1, by the increase, if any, in the April Consumer Price Index - Urban Wage Earners and Clerical Workers Index for Seattle – Tacoma – Bremerton, for the previous year, rounded to the nearest \$5.

NOW, THEREFORE, BE IT RESOLVED that the Kitsap Public Health Board does authorize and approve Resolution 2018-04, Amending Environmental Health Division Fee Schedule, effective September 4, 2018, and until further notice.

CONFLICTING RESOLUTIONS: To the extent that the fee schedule described above is inconsistent with prior provisions of the Kitsap Public Health Board Resolutions, the prior provisions are hereby repealed.

APPROVED: September 4, 2018

EFFECTIVE: September 4, 2018

Mayor Becky Erickson, Chair
Kitsap Public Health Board

Kitsap Public Health Board Resolution 2018-04
Kitsap Public Health District
Environmental Health Division
Fee Schedule (Effective September 4, 2018)

Item No.		2018 Fee	2019 Fee
	<u>GENERAL</u> ^{1,2,3}		
1	Administrative Meetings or Appeal Hearings:		
	Administrative Review Meeting with Environmental Health Director	130	145
	Appeal Hearing with Health Officer	390	435
	Appeal Hearing with Board of Health (Hearing with Health Officer is a required prerequisite)	520	580
2	Standard Hourly Rate	130	145
3	Delinquent Service/Payment > 30 days Overdue	1%/day up to 30 days	1%/day up to 30 days
	Non-Sufficient Funds (NSF) Fee	25	25
	Refund Handling Fee ⁴	25	25
4	Photocopies (Plus postage and handling when applicable)	\$0.15/copy	\$0.15/copy
5	Work without Permit Investigation Fee: The cost of the original applicable permit fee the applicant failed to obtain in addition to the cost of the current applicable permit fee.	Project Specific	Project Specific
Item No.	<u>WATER</u> ^{2,3}	2018 Fee	2019 Fee
	(*Note: Please refer to Onsite Sewage Program section for Building Site Applications and Building Clearance service charges.)		
6	Group B public water system annual operating permit	75	75
7	Water Status Reports - Public Water Supply:		
	Group A or B	130	145
	Water Status Reports - Private Individual and Private Two-Party (includes bacteriological water sample)	280	310
	Water Status Reports - Private Individual and Private Two-Party (Includes bacteria and nitrate water samples)	310	340
	Water Status Reports - Private Individual and Private Two-Party (no water samples)	260	290
	Amended Water Status Report (following correction of items of non-compliance - includes a site inspection to collect a bacteriological water sample)	150	165
	Amended Water Status Report (following correction of items of non-compliance, no site inspection and no KPHD sampling)	100	110
8	Building Clearances for Sewered Properties		
	Properties with a public water supply	80	90
	Properties with a private water supply	130	145
9	Water System Plan Reviews:		
	New or Existing Unapproved Group B ⁶	910	1,015
	Expanding Group B or Group A ⁷	130	145
10	Sanitary Surveys:		
	Group A	650	725
	Group B	390	435
11	Surface Seal Inspection	130	145
12	Well Decommissioning	195	220
13	Waiver Applications	130	145
14	Irrigation Well Waiver Applications	260	290
15	Well Site Inspections (Not Associated with BSA):		
	Replacement, Group A or B Public Well Site, Irrigation or other Non-Potable Well	520	580
	Amended Well Site Inspection	130	145
16	Coordinated Water System Plan Review	130	145
17	Miscellaneous:		
	Copy of local regulations (Plus postage and handling when applicable)	12	12
	Re-inspection for Compliance	130	145
18	Water System Designer Certifications:	2018 Fee	2019 Fee
	Annual Renewal ⁸	195	220
	Delinquent Certification Renewal Fee	325	365
19	Environmental Monitoring Services:		

Kitsap Public Health Board Resolution 2018-04
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	Environmental Monitoring/Reporting ⁷ (Labor Only).	130	145
Item No.	<i>ONSITE SEWAGE</i> ^{2,3}	2018 Fee	2019 Fee
	New/Alteration/Expansion Building Site Applications (BSA) ⁹ (Total includes mandatory Drinking Water service charges as shown):		
20	Single Family Residential Onsite Sewage System w/ Private Water Supply (Existing or proposed water source):		
	Onsite Service Charge	500	555
	Drinking Water Service Charge	460	515
	Total	960	1,070
21	Single Family Residential Onsite Sewage System on Public Water Supply:		
	Onsite Service Charge	500	555
	Drinking Water Service Charge	225	255
	Total	725	810
22	Multi-Family/Community, Residential or Commercial Onsite Sewage System on Private Water Supply:		
	Onsite Service Charge	650	725
	Drinking Water Service Charge	455	510
	Total	1,105	1,235
23	Multi-Family/Community Residential or Commercial Onsite Sewage System on Public Water Supply:		
	Onsite Service Charge	650	725
	Drinking Water Service Charge	195	220
	Total	845	945
24	Redesign BSA:		
	Onsite Service Charge	165	180
	Drinking Water Service Charge	130	145
	Total	295	325
25	Repair or Replacement BSA (No Alteration or Expansion) - Includes OSS Waiver(s)		
	Onsite Service Charge	390	435
	Drinking Water Service Charge	100	110
	Total	490	545
26	OSS Remediation Application	260	290
27	Pre-Application Meeting for BSA	130	145
28	BSA Revisions (Minor Site Plan changes)	65	75
29	BSA Wet Weather Review ¹⁰	260	290
30	Building Clearance (BC) - Residential		
	Onsite Service Charge	195	220
	Drinking Water Service Charge	100	110
	Total	295	330
31	Building Clearance - Commercial		
	Onsite Service Charge	390	435
	Drinking Water Service Charge	100	110
	Total	490	545
32	Building Clearance Exemption ¹¹	100	110
33	Commercial Building Clearance Exemption ¹¹	130	145
34	Accepted BSA/BC Records Replacement for Building Permit	10	10
35	BSA - Compliance: (For Reserve area/Records establishment for Onsite Sewage System (OSS) when submitted independently; Does not include Drinking Water review)	260	290
36	Sewage System Permits: ¹²	2018 Fee	2019 Fee
	New, Replacement, or Repair Installation	650	725
	Tank Replacement/Connection, Component Repair/Replacement, Remediation	195	220
37	Re-Inspection for Sewage Disposal Permit Violation	195	220
38	OSS Installation Wet Weather Review	130	145
39	Monitoring and Maintenance Fees: ¹³		

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	Annual Contract fee	50	60
	Incomplete/Erroneous Report Resubmittal Fee	50	60
40	Pumping or Inspection Report Submittal Fee (RESERVED)	TBD	TBD
41	OSS Waiver Requests (New, Redesign, Alteration BSA, Building Clearance, Building Compliance, Building Permit, and Sewage Disposal Permits)	130	145
42	Installer, Pumper and Maintenance Specialist (including Residential Homeowner) Certifications:		
	Initial Certification	390	435
43	Annual Renewals of Valid Certifications: ⁸		
	Installer, Maintenance Specialist & Pumper (1st Truck)	195	220
	Annual Pumper Renewal for Each Additional Truck	65	75
	Homeowner Monitoring & Maintenance	130	145
	Delinquent Certification Renewal Fee	260	290
44	Administrative Conference Fee	260	290
45	State Licensed Designer/Engineer		
	Local Referral List Publishing & Maintenance (Optional)	65	75
46	Property Conveyance Inspection and Evaluation Report for Onsite Sewage System (Non-refundable; See Water Status Report item in Drinking Water section for water only review) ¹⁴	260	290
47	Property Conveyance Inspection and Evaluation Report for Onsite Sewage System for property connected to a Group A public water system (Non-refundable; See Water Status Report item in Drinking Water section for water only review) ¹⁴ (RESERVED)	TBD	TBD
48	Property Conveyance Inspection and Evaluation Report for Onsite Sewage System for property connected to a Group B public water system or private water supply (Non-refundable; See Water Status Report item in Drinking Water section for water only review) ¹⁴ (RESERVED)	TBD	TBD
49	Amended OSS and/or Drinking Water Supply Evaluation Report (Following correction of items of non-compliance when no site visit is needed)	100	110
50	Amended OSS and/or Drinking Water Supply Evaluation Report (Following correction of items of non-compliance - includes a site inspection)	130	145
	Land Use Applications (Total Includes Mandatory Drinking Water Service Charges as Shown): ¹⁵		
51	Subdivision with Public Sewer:		
	Onsite Service Charge	95	105
	Drinking Water Service Charge	95	105
	Total	190	210
52	Subdivision with Onsite Sewage Systems (OSS):		
	Onsite Service Charge	395	440
	Drinking Water Service Charge	175	195
	Total	570	635
53	Amended Subdivision with OSS:		
	Onsite Service Charge	130	145
	Drinking Water Service Charge	130	145
	Total	260	290
54	Large Lot Subdivision (These include Preliminary/Final/Amendment/Alteration reviews)	130	145
55	Conditional Use/Other Land Use Applications	130	145
56	Miscellaneous:		
	Copy of Local OSS Regulations (Plus Postage and Handling if Applicable)	12	12
	Technical Assistance ⁷	130	145
	Repeat Inspections for Code Violations ⁷ (When not Otherwise Specified).	130	145
Item No.	FOOD ^{2,3,16,17}	2018 Fee	2019 Fee
57	Change of ownership application (New permit holder without menu or equipment change, must be submitted within 30 days of ownership change or a full plan review fee will be required)	130	145
58	Bakeries	360	400
59	Bed & Breakfasts/Hotel/Motel (Breakfast Only)	295	325
60	Caterers:		
	With Commissary	585	655
	With Restaurant	260	290
61	Demonstrators	260	290

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62	Food Handler Permits:		
	(Set by State BOH)	10	10
	Duplicate for Lost Card	10	10
	Food Worker Class Fee - Regular business day by appointment Only (minimum 20 people; includes card fee for up to 20 people. \$10/person additional for each person over the first 20)	200	200
63	Groceries:		
	1-3 checkouts	260	290
	3 or more checkouts	555	615
64	High Priority Inspections	195	220
65	Limited Menus	295	325
66	Meat/Fish Markets	360	400
67	Mobile Units	585	655
68	Plan Review and Pre-Op Inspections: ¹⁸		
	Change in Menu and/or Equipment Review	195	220
	Food Establishment Plan Review - Low Risk Establishments	260	290
	Food Establishment Plan Review - High Risk Establishments	325	365
	Variance Request Review	195	220
	Special Process Plan Review	325	365
69	Reinspections - Each Re-Inspection after First Re-Inspection ¹⁹	130	145
70	Restaurants (No Lounge):	585	655
	Seasonal (9 months or less) 75% fee schedule menu	440	365
	Special Process Permit	260	290
71	Restaurants (With Lounge):	650	725
	Special Process Permit	260	290
	Taverns (No Food)	255	280
72	Schools:		
	Central Kitchen	585	650
	Preschools/Headstart/ECAP	260	290
	Warming Kitchen	295	325
	Temporary Permits (due 14 days prior to event): ²⁰		
73	Bake Sale/Exempt Food Application Review	No Charge	No Charge
74	Limited Menu - Single Event	55	55
75	Limited Menu - Seasonal Multiple Events	95	95
76	Non-Complex Menu:		
	During Work Hours Single Event	85	85
	Non-Work Hours (Weekends, Holidays, etc.) Single Event	95	95
	Seasonal Multiple Events	125	125
77	Complex Menu:		
	During Work Hours Single Event	110	110
	Non-Work Hours (Weekends, Holidays, etc.) Single Event	115	115
	Seasonal Multiple Events	175	175
78	Single Menu, Single Event, Multiple Vendors	350	350
Item No.	<u>LIVING ENVIRONMENT</u> ^{2,3,16}	2018 Fee	2019 Fee
	Public or Semi Public Swimming Pools and Hot Tubs: ²¹		
79	One Pool - Year Round Operation	880	980
	Each Additional Year Round Pool	165	180
80	One Pool - Seasonal Operation	685	760
	Each Additional Seasonal Operation Pool	130	145
81	Residential Neighborhood Private Pools ⁷	195	220
82	Pre-op Inspections Pools, Camps ^{7,18}	195	220
83	Reinspections: Each Re-Inspection after First Re-Inspection ¹⁹	130	145
84	School Plan Reviews ⁷	130	145

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85	Camps ²²	390	435
Item No.	<i>SOLID AND HAZARDOUS WASTE</i> ^{2,3}	2018 Fee	2019 Fee
86	Permit Application/Permit Modification Service Charges: ^{7,23}		
87	Compost Facilities	130	145
88	Land Application Facilities	130	145
89	Energy Recovery/Incineration	130	145
90	Intermediate SW Handling Facilities: Transfer Stations, Compaction/Baling Sites and Drop Boxes	130	145
91	Storage/Treatment Piles	130	145
92	Surface Impoundments/Tanks	130	145
93	Waste Tire Storage Facility	130	145
94	Mixed Municipal Waste Landfill	130	145
95	Limited Purpose Landfill	130	145
96	Inert Waste Landfills	130	145
97	Other Methods of Solid Waste Handling	130	145
	Annual Permit Renewal Service Charges: ²⁴		
98	Recycling Facilities Conditionally - Exempt Facility Fee ²⁵	130	145
99	Compost Facilities:		
	Conditionally Exempt Facility Fee ²⁵	130	145
	Commercial Compost Facilities	2,600	2,900
100	Land Application Facilities:		
	Sites Without Monitoring	780	870
	Sites With Monitoring	1,560	1,740
101	Energy Recovery/Incineration	1,560	1,740
102	MMSW Haulers	160	180
	Plus Per Truck	15	15
103	Site Restoration Haulers	130	145
104	Biomedical Waste Hauler	235	260
	Plus Per Truck	15	15
105	CRT Haulers	160	170
106	Intermediate SW Handling Facilities: Transfer Stations, Compaction/Baling Sites and Drop Boxes		
	Conditionally Exempt MRF Facility Fee ²⁵	130	145
	Transfer Stations	2,600	2,900
	Compaction/Baling Sites	1,560	1,740
	Drop Boxes	1,430	1,595
	Decant Facilities	780	870
107	Storage/Treatment Piles:	2018 Fee	2019 Fee
	Conditionally Exempt Facility Fees - Wood and Inert Waste Piles ²⁵	130	145
	Piles	1,560	1,740
108	Surface Impoundments/Tanks:		
	Tanks	780	870
	Surface Impoundments With Leak Detection	1,560	1,740
	Surface Impoundment With GW Monitoring	2,340	2,610
109	Waste Tire Storage Facility	780	870
110	Moderate Risk Waste Handling Facility:		
	Conditionally Exempt Facility Fees ²⁵ (Mobile Systems, Collection Events, and Limited MRW Facilities)	130	145
	Moderate Risk Waste Facility	2,340	2,610
111	Mixed Municipal Waste Landfill: ⁷	130	145
112	Limited Purpose Landfill	2,340	2,610
113	Inert Waste Landfills > 250 CYDS Landfill	2,600	2,900
114	Landfill Closure Permit ⁷	130	145

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115	Landfill Post Closure Permit ^{7,26}	130	145
116	Secure Medicine Return Plan Review Fee ²⁷	15,600	17,400
117	Secure Medicine Return Plan Annual Operating Fee ²⁸	6,500	7,250
118	Secure Medicine Return Revised Plan Review Fee ²⁹	390	435
119	Secure Medicine Return Plan Enforcement Fee ⁷	130	145
120	Secure Medicine Return Plan Alternative Disposal Review Fee ²⁹	390	435
121	Other Methods of Solid Waste Handling ⁷	130	145
	Plan Reviews ³⁰	130	145
	Site Development Activity Permit (SDAP-Fill & Grading)	130	145
	Bio-Solids State Permit, Plan, and Report Reviews ³¹	130	145
	Environmental Monitoring Activities (Labor Only)	130	145
	Illegal Drug Manufacturing Operation Inspection, Notification, Assessment, Plan and Record Review	130	145
122	Copy of Local Regulations (Plus Postage and Handling if Applicable)	12	12

FOOTNOTES

1	Fees and applications are not transferable.
2	The Health Officer may waive all, or part, of any service charge on a case-by-case when just cause is demonstrated. When written application for waiver to a service charge is made and granted, the new service charge shall be based at the standard hourly rate.
3	Activities not specifically identified in this Service Charge Schedule will be billed at the hourly rate.
4	Refunds are at the discretion of the Health Officer; the handling fee will be subtracted from any Health Officer-approved refund.
5	Reserved
6	The hourly rate will apply after the first seven (7) hours.
7	The hourly rate will apply after the first hour.
8	If the certification is not paid prior to the due date, the applicant must pay, in addition to the certification service charge, a Delinquent Certification Renewal Fee. After a 90 day delinquent period, a retest for certification will be required. On July 1 of each year all certifications, unless renewed, shall become void and of no effect.
9	New Building Site Applications (BSA) are valid for a period of three (3) years and 30 days from the date of submittal.
10	Wet Weather Review for BSA includes three (3) site visits.
11	Building Clearance Exemption service charge covers staff time to conduct records search, plan review, and record processing; subject to the Health District's policy covering Building Clearance Exemption Referrals.
12	The Sewage Disposal Permit expires within a period of one (1) year from the date of issuance unless a current valid Building Permit has been obtained for the property site.
13	For each system dispersal component. Review service charges are minimum charges. Time records will be maintained on all monitoring report reviews. Any costs over the deposit paid will be billed at the hourly rate.
14	Duplexes will require full fees for each address unless the duplex shares an individual drainfield. Duplexes with shared drainfields will receive one report for both addresses. If separate Property Conveyance Reports are requested for each address when a drainfield is shared, separate applications must be submitted and full service charges paid for each report.
15	Plat Review service charges are minimum charges. Time records will be maintained on all plats with onsite sewage reviews. Any costs over the deposit paid will be billed at the hourly rate. Plats will not be signed as approved until the Health District receives payment in full.
16	If a permit service charge is not paid prior to the due date, the applicant must pay, in addition to the permit service charge, a late penalty equal to 1% of the regular service charge for each day payment is late. The late penalty of 1% will be assessed only for thirty (30) days. If payment is not made within thirty (30) days of the due date, the establishment will be subject to closure in accordance with food service rules and regulations. The Health Officer may waive penalties, in whole or in part, where it is determined that the delay in payment has been caused by mistake or excusable neglect on the part of the person billed.
17	Inspections of establishments will be made in accordance with provisions of Kitsap Public Health Board Ordinance 2014-01 Food Service Regulations. The requirement for re-inspections is at the discretion of the Health Officer and is determined by the severity of violations in accordance with applicable state and local food regulations.

Kitsap Public Health Board Resolution 2018-04
Kitsap Public Health District
Environmental Health Division
Fee Schedule (Effective September 4, 2018)

18	Minimum one (1) hour.
19	The first re-inspection during the permit year will be conducted at no charge. Any additional re-inspections shall be charged at the Standard Hourly Rate. Payment of re-inspection service charges must be made within thirty (30) days of the billing date. If payment is not made prior to annual licensing renewal time, a new permit will not be issued.
20	Single event temporary permits are good for a maximum of 21 days. Applications and service charges for temporary permits are due fourteen (14) calendar days prior to the event to allow for weekend inspection scheduling and coordination with participants for approval. There is a 25% permit fee surcharge for applications submitted from 13 to 2 days prior to an event. There is a 50% permit fee surcharge for applications submitted 48 hours or less prior to an event. Non-complex menu permits are for one-step food preparation procedures for temporary permits. Complex menu permits are for operations that have multiple steps in food preparation.
21	Inspections will be made in accordance with provisions of rules and regulations of the State Board of Health governing swimming pool facilities. The requirement for re-inspections is at the discretion of the Health Officer and is determined by the severity of violations in accordance with applicable state and local regulations.
22	Camps, which are serving food year round are required to license the food service facility according to the Food Program Service Charge Schedule in effect at the time of application. It is the intent to provide two (2) food service facility inspections per year for those operating year round. Camps operating on a seasonal basis shall license the food service facility according to the seasonal Food Program Service Charge Schedule. Camp pool facilities shall be licensed and inspected according to this Service Charge Schedule. Camp inspections include a bathing beach and one sanitary facility inspection.
23	Charge covers completed permit application review, new or modified permit drafting/issuance, facility inspections for permit compliance, required monitoring and data review, and required plan and design review.
24	Charges cover annual permit renewal/issuance, facility inspections for permit compliance, required monitoring and data review, and required plan and design review. Charges are assessed based on staff hours expended at the hourly rate approved by the Kitsap County Board of Health for that year. Charges will be billed at a frequency agreed to by the permittee.
25	Conditionally exempt hourly fees are assessed to evaluate conditional exemption status, annual reports, and to conduct annual inspections, as needed. These fees include time expended on non-compliance and re-inspection and will be based on the hours spent regulating the facility the previous calendar year.
26	A permit issued to a facility once closure construction activities are completed, which governs the requirements placed upon a facility after closure to ensure its environmental safety for at least a twenty-year period or until the site becomes stabilized (i.e., little or no settlement, gas production, or leachate generation).
27	The hourly rate will apply after the first fifty (50) hours.
28	The hourly rate will apply after the first one hundred (120) hours.
29	The hourly rate will apply after the first three (3) hours.
30	Service charges will be assessed for the review of plans or proposals not specifically associated with a facility permit application.
31	Fees for Biosolid facilities include time to review permits, review reports and to conduct inspections. Non-compliance issues would be billed separately. In addition to review charges for Bio-Solids State Permit, Plan and Report Reviews, charges are assessed for non-routine regulatory activities associated with facility noncompliance.

MEMO

To: Kitsap Public Health Board
From: Katie Eilers, Director of Community Health
Date: September 4, 2018
Re: Communicable Disease Prevention: Syringe Exchange Program

Preventing and controlling the spread of disease is a core duty and responsibility of local health boards and local health officers ([RCW 70.05](#)). Drug use practices that can lead to transmission of HIV and other harms are a critical public health issue affecting communities across the U.S. and Kitsap County. International evidence demonstrates that effective communicable disease prevention programming for people who use drugs can reduce transmission of HIV. Drug user participation in programs like the health district's syringe exchange program has been shown to lead to reduced HIV incidence and prevalence and reduced needle and equipment reuse.

By providing an adequate supply of sterile syringes to intravenous drug users, coupled with education on safe injection practices and linkage to social and health resources, the risk for the spread of disease declines. While disease transmission prevention is the primary driver of the health district's syringe exchange program, this strategy also fills an important space in the opioid response continuum of services in our county by serving as a bridge between intravenous drug users and treatment services. Additionally, as an exchange program where clients return used syringes, the health district plays an important role in safe syringe disposal.

During this brief informational presentation, we will provide an overview of the health district's syringe exchange program, a profile of the impact of intravenous drug use in the County, a highlight of syringe distribution/collection data for the program, and a summary of recommended next steps for the program.

Recommended Action

None – for informational purposes only.

Please contact Katie Eilers with any questions or concerns about this matter at (360) 728-2224, or katie.eilers@kitsappublichealth.org.

Syringe Exchange Program

September 4, 2018
Kitsap Public Health District Board

Katie Eilers, MPH, MSN, RN, Director of Community Health



KITSAP PUBLIC HEALTH DISTRICT

Syringe Exchange Program Overview – Communicable Disease Prevention

- IV drug use contributes to blood borne pathogen transmission
- HIV of greatest concern
- Exchange programs provide sterile syringes & education on safe injection practice

RESULT = reduced HIV transmission



Syringe Exchange Program Overview – Bridge to services

- Considered an important component of the opioid response service continuum
- Links clients to medication assisted treatment, recovery, and other needed health and social services
- Non-judgmental relationship is the key



Syringe Exchange Program Overview – Syringe Disposal

- Clients strongly encouraged to safely store used syringes and return to KPHD
- KPHD provides safe storage containers with syringe distribution

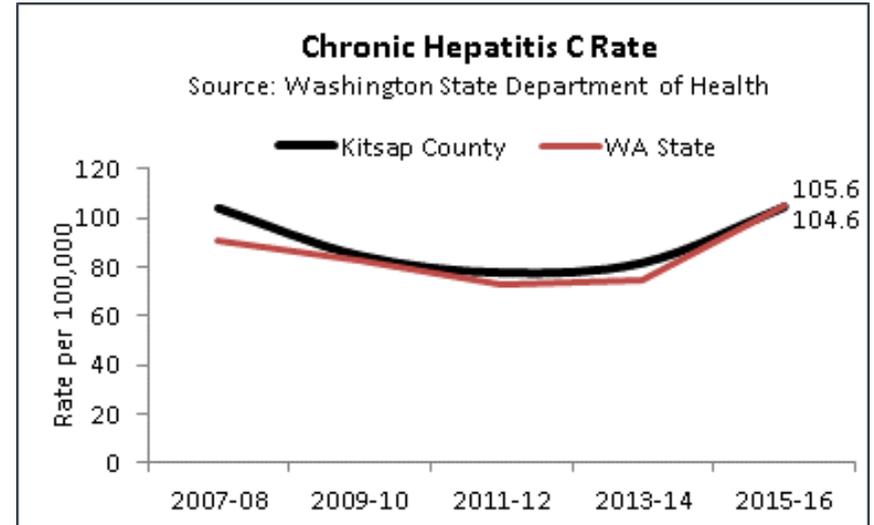
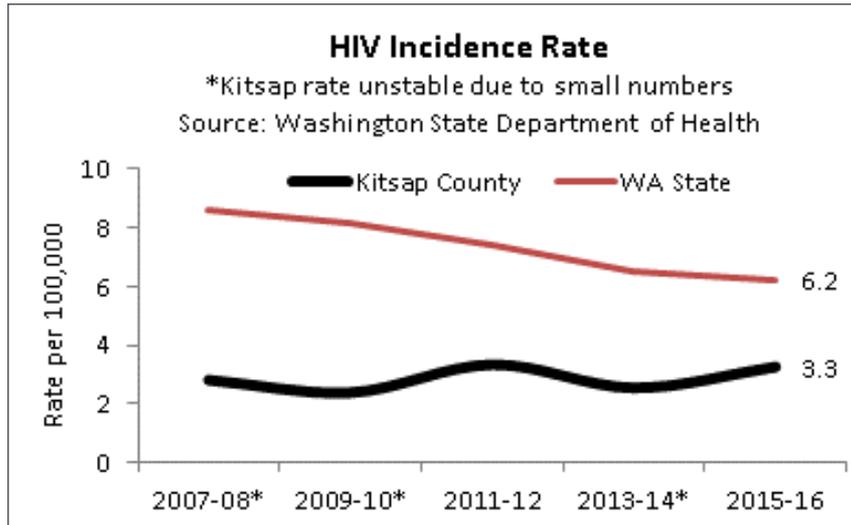


Syringe Exchange Programs in WA

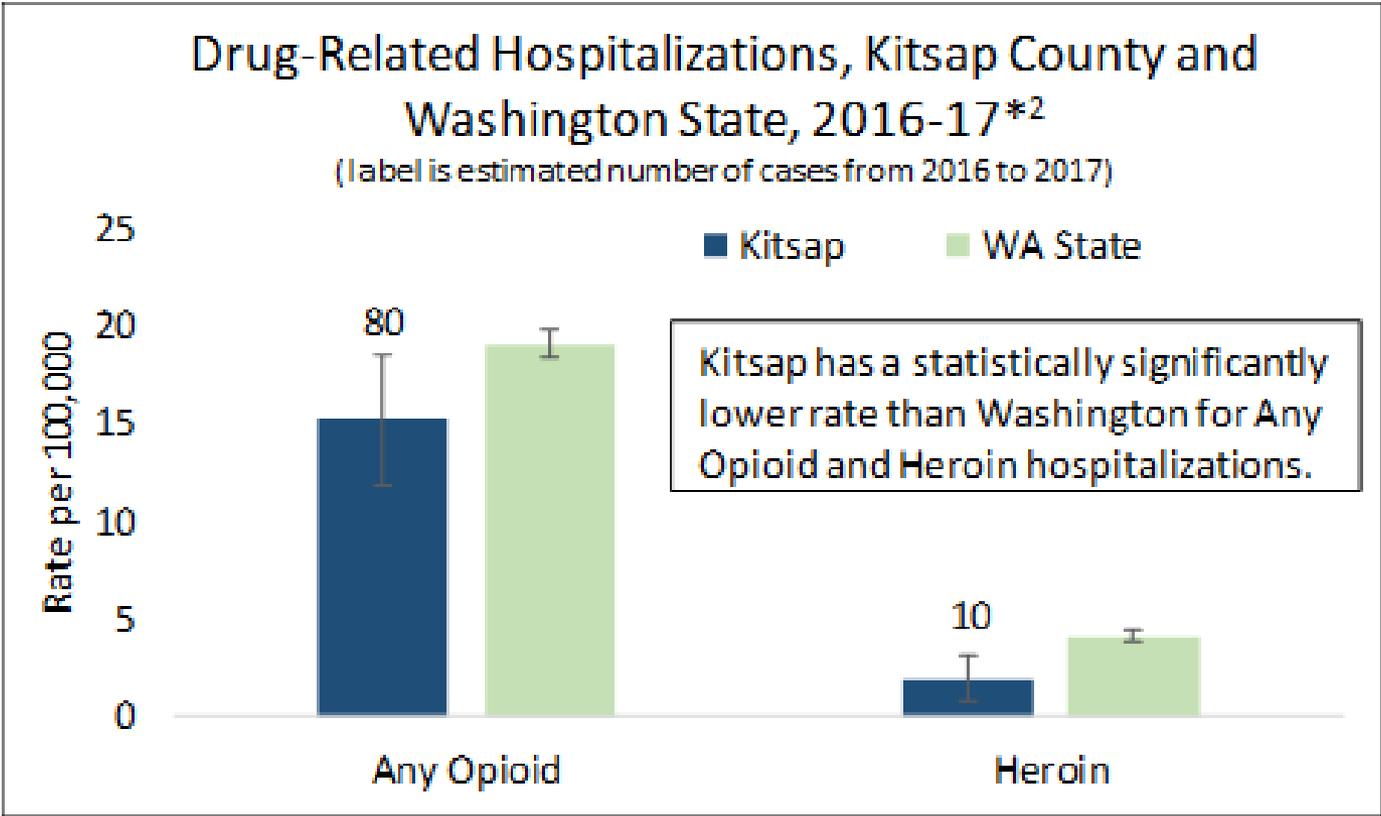
- Public Health Agencies in west-side of state
 - Clallam
 - Clark
 - Island
 - Grays Harbor
 - Jefferson
 - King
 - Mason
 - Skagit
 - Snohomish
 - Thurston
 - Whatcom
- Tacoma Pierce operated by local non-profit agency



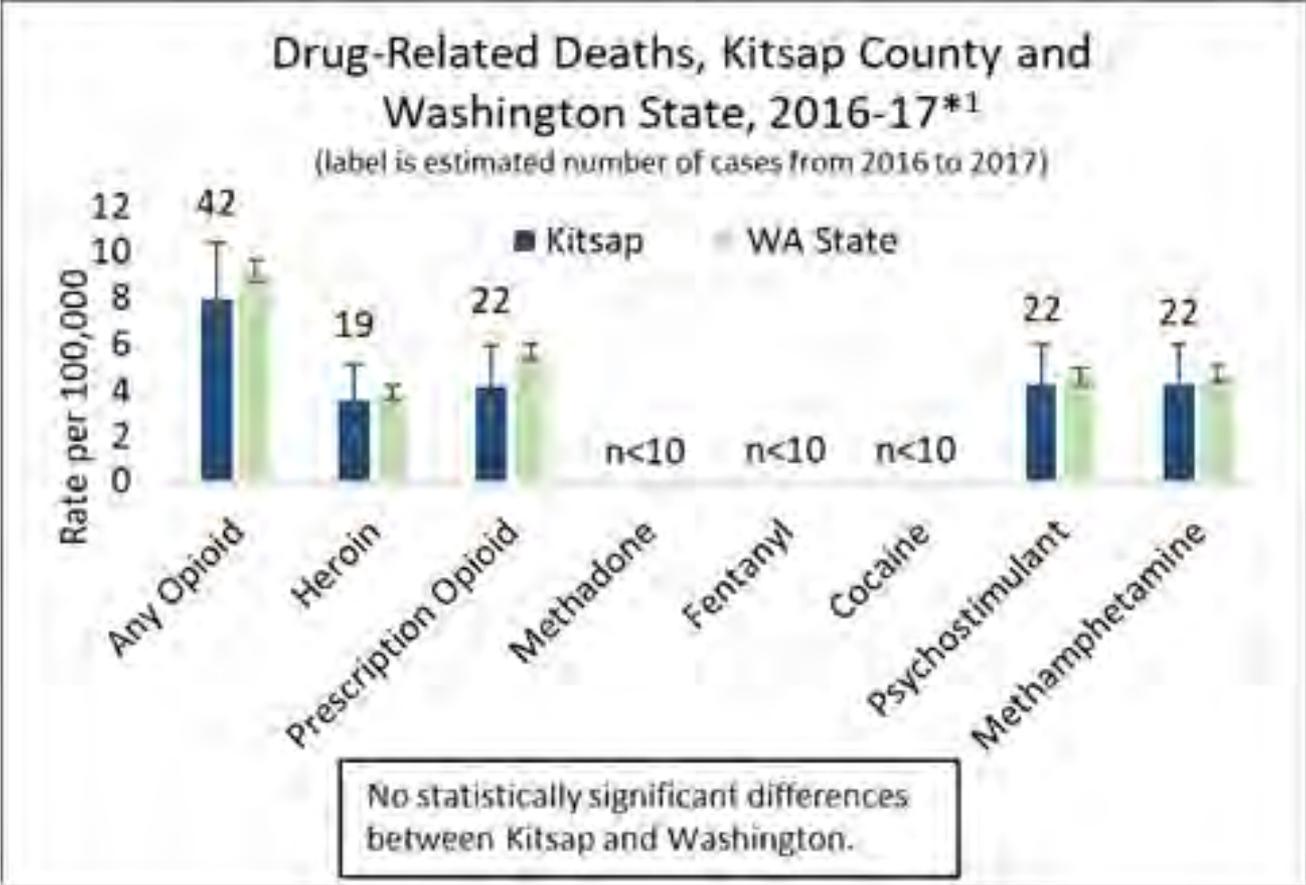
HIV and Hepatitis C



Drug-Related Hospitalizations



Drug-related Deaths



Profile of Clients (2017 data)

- 2,970 encounters
- 4,340 referrals (each encounter can have >1 referral)
- Slightly more male encounters than female encounters (53% versus 47%)
- 1% below age 20; 24% age 20- 29
- majority above age 30
- 84% White
- 5% AI/AN; 4% Black; 6% more than one race



Primary and Secondary Exchange

- On-site syringe exchange at KPHD
- Mobile syringe exchange subcontracted to the People's Harm Reduction Alliance



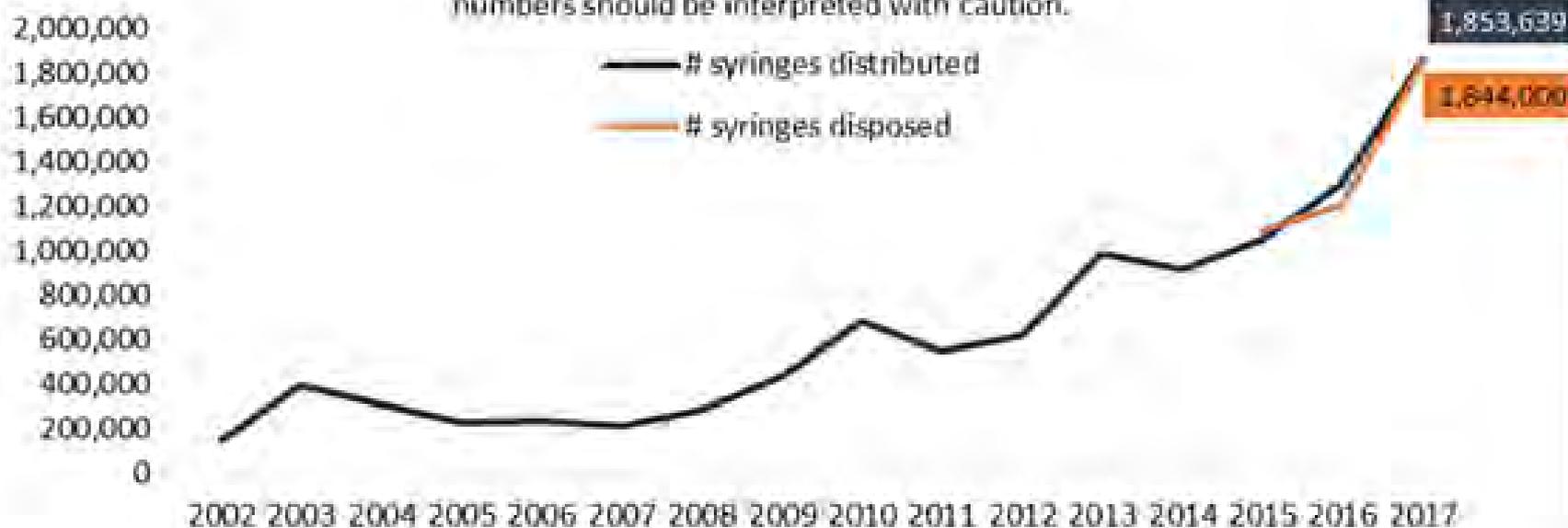
Procedure for Exchange

- Data collection – demographics, referrals, new/repeat client
- Provide supplies based on usage need
- Manage process for used syringe disposal
- Refer to resources, prioritizing treatment
- Instruct on safe syringe practice and disposal



Estimated Number of Syringes Exchanged at Kitsap Public Health District

Because the number of syringes is an estimate, numbers should be interpreted with caution.



Syringe Distribution and Disposal, 2015 - 2017

- 4.2 million sterile syringes distributed
- Estimated disposal of 4.135 million used syringes (conservative)
Over 15,000 pounds of syringes disposed

Limitation with exact disposal number:

- Staff cannot count used syringes
- Clients sometimes include other items in containers
- Estimates based on volume of safe disposal containers and number of containers disposed
- Lag time for return of syringes



2018 Program budget overview

Revenues ~ \$200,000

- In-kind supply donations from DOH
- DOH direct contract funding
- Local

Expenditures ~ \$300,000

- Staffing (counselling, disposal preparation)
- Contract w/ People's Harm Reduction Alliance
- Supplies
- Disposal fees



Advantages and Disadvantages

Advantage	Disadvantage
HIV and Hepatitis C prevention	Increased syringe supply may lead to more improper used syringe disposal
Wound prevention, reduced use antibiotics in community	Stigma of mobile services in community
Bridge to treatment	Cost of syringes, disposal, staff
Access to safe disposal	
Narcan distribution source	
Increased access to syringes through mobile services	
Cost savings for HIV and Hepatitis C treatment	



Next Steps

- Conduct QA of current model and review emerging best practices
- Better assess current scope of problem of improper syringe disposal
- Reduce expenses and/or increase revenues



Questions?

Katie Eilers
Director of Community Health
Katie.Eilers@kitsappublichealth.org



KITSAP PUBLIC HEALTH DISTRICT