

§ 141.1

40 CFR Ch. I (7–1–02 Edition)

implement to continue to avoid filtration?

- 141.522 How does the State determine whether my system's watershed control requirements are adequate?

DISINFECTION PROFILE

- 141.530 What is a disinfection profile and who must develop one?
- 141.531 What criteria must a State use to determine that a profile is unnecessary?
- 141.532 How does my system develop a disinfection profile and when must it begin?
- 141.533 What data must my system collect to calculate a disinfection profile?
- 141.534 How does my system use this data to calculate an inactivation ratio?
- 141.535 What if my system uses chloramines, ozone, or chlorine dioxide for primary disinfection?
- 141.536 My system has developed an inactivation ratio; what must we do now?

DISINFECTION BENCHMARK

- 141.540 Who has to develop a disinfection benchmark?
- 141.541 What are significant changes to disinfection practice?
- 141.542 What must my system do if we are considering a significant change to disinfection practices?
- 141.543 How is the disinfection benchmark calculated?
- 141.544 What if my system uses chloramines, ozone, or chlorine dioxide for primary disinfection?

COMBINED FILTER EFFLUENT REQUIREMENTS

- 141.550 Is my system required to meet subpart T combined filter effluent turbidity limits?
- 141.551 What strengthened combined filter effluent turbidity limits must my system meet?
- 141.552 My system consists of "alternative filtration" and is required to conduct a demonstration—what is required of my system and how does the State establish my turbidity limits?
- 141.553 My system practices lime softening—is there any special provision regarding my combined filter effluent?

INDIVIDUAL FILTER TURBIDITY REQUIREMENTS

- 141.560 Is my system subject to individual filter turbidity requirements?
- 141.561 What happens if my system's turbidity monitoring equipment fails?
- 141.562 My system only has two or fewer filters—is there any special provision regarding individual filter turbidity monitoring?
- 141.563 What follow-up action is my system required to take based on continuous turbidity monitoring?

- 141.564 My system practices lime softening—is there any special provision regarding my individual filter turbidity monitoring?

REPORTING AND RECORDKEEPING REQUIREMENTS

- 141.570 What does subpart T require that my system report to the State?
- 141.571 What records does subpart T require my system to keep?

AUTHORITY: 42 U.S.C. 300f, 300g-1, 300g-2, 300g-3, 300g-4, 300g-5, 300g-6, 300j-4, 300j-9, and 300j-11.

SOURCE: 40 FR 59570, Dec. 24, 1975, unless otherwise noted.

NOTE: For community water systems serving 75,000 or more persons, monitoring must begin 1 year following promulgation and the effective date of the MCL is 2 years following promulgation. For community water systems serving 10,000 to 75,000 persons, monitoring must begin within 3 years from the date of promulgation and the effective date of the MCL is 4 years from the date of promulgation. Effective immediately, systems that plan to make significant modifications to their treatment processes for the purpose of complying with the TTHM MCL are required to seek and obtain State approval of their treatment modification plans. This note affects §§141.2, 141.6, 141.12, 141.24 and 141.30. For additional information see 44 FR 68641, Nov. 29, 1979.

Subpart A—General

§ 141.1 Applicability.

This part establishes primary drinking water regulations pursuant to section 1412 of the Public Health Service Act, as amended by the Safe Drinking Water Act (Pub. L. 93-523); and related regulations applicable to public water systems.

§ 141.2 Definitions.

As used in this part, the term:

Act means the Public Health Service Act, as amended by the Safe Drinking Water Act, Public Law 93-523.

Action level, is the concentration of lead or copper in water specified in §141.80(c) which determines, in some cases, the treatment requirements contained in subpart I of this part that a water system is required to complete.

Best available technology or *BAT* means the best technology, treatment techniques, or other means which the Administrator finds, after examination