

MISSISSIPPI STATE DEPARTMENT OF HEALTH  
BUREAU OF PUBLIC WATER SUPPLY  
CCR CERTIFICATION FORM  
CALENDAR YEAR 2012

2013 JUN 28 PM 4: 08

City of Olive Branch - Bridgetown 0170032  
Public Water Supply Name

List PWS ID #s for all Community Water Systems included in this CCR

The Federal Safe Drinking Water Act (SDWA) requires each Community public water system to develop and distribute a Consumer Confidence Report (CCR) to its customers each year. Depending on the population served by the public water system, this CCR must be mailed or delivered to the customers, published in a newspaper of local circulation, or provided to the customers upon request. Make sure you follow the proper procedures when distributing the CCR. **Since this is the first year of electronic delivery, we request you mail or fax a hard copy of the CCR and Certification Form to MSDH. Please check all boxes that apply.**

Customers were informed of availability of CCR by: *(Attach copy of publication, water bill or other)*

- Advertisement in local paper (attach copy of advertisement)
- On water bills (attach copy of bill)
- Email message (MUST Email the message to the address below)
- Other \_\_\_\_\_

Date(s) customers were informed: 6/12/13, / / , / /

CCR was distributed by **U.S. Postal Service** or other direct delivery. Must specify other direct delivery methods used \_\_\_\_\_

Date Mailed/Distributed: 6/27/13

CCR was distributed by Email (MUST Email MSDH a copy) Date Emailed: / /

- As a URL (Provide URL \_\_\_\_\_)
- As an attachment
- As text within the body of the email message

CCR was published in local newspaper. *(Attach copy of published CCR or proof of publication)*

Name of Newspaper: Desoto Times Tribune

Date Published: / /

CCR was posted in public places. *(Attach list of locations)* Date Posted: 6/12/13

CCR was posted on a publicly accessible internet site at the following address **(DIRECT URL REQUIRED)**:

www.obms.us

**CERTIFICATION**

I hereby certify that the 2012 Consumer Confidence Report (CCR) has been distributed to the customers of this public water system in the form and manner identified above and that I used distribution methods allowed by the SDWA. I further certify that the information included in this CCR is true and correct and is consistent with the water quality monitoring data provided to the public water system officials by the Mississippi State Department of Health, Bureau of Public Water Supply.

[Signature]  
Name/Title (President, Mayor, Owner, etc.)

6/27/13  
Date

Deliver or send via U.S. Postal Service:  
Bureau of Public Water Supply  
P.O. Box 1700  
Jackson, MS 39215

May be faxed to:  
(601)576-7800  
May be emailed to:  
Melanie.Yanklowski@msdh.state.ms.us

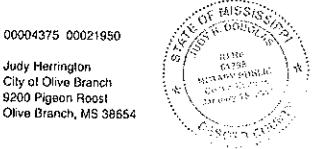
CITY OF OLIVE BRANCH  
**Affidavit of Publication**  
DE SOTO TIMES-TRIBUNE  
STATE OF MISSISSIPPI) SS  
COUNTY OF DESOTO)

DIANE SMITH, being duly sworn, says:  
That she is a Clerk of the DE SOTO TIMES-TRIBUNE, a newspaper of general circulation in said county, published in Hernando, DeSoto County, Mississippi, that the publication, a copy of which is printed hereon, was published in the said newspaper on the following dates:  
June 20, 2013

That said newspaper was regularly issued and circulated on those dates.  
SIGNED: Diane Smith  
Clerk  
Subscribed to and sworn to me this 20th day of June 2013.

My commission expires: January 15, 2017

00004375 00021950  
Judy Harrington  
City of Olive Branch  
9200 Pigeon Root  
Olive Branch, MS 38854



**BRIDGETOWN 0170032 2012**

**Is my water safe?**  
We are pleased to provide this year's Annual Water Quality Report (Consumer Confidence Report) as required by the Safe Drinking Water Act (SDWA). This report is designed to provide you with information about your water's quality. We are committed to providing you with information because informed customers are our best asset.

**Do I need to take special precautions?**  
Some people may be more vulnerable to contaminants in drinking water than the general population. Infants and young children, pregnant women, the elderly, and people with certain chronic conditions, such as immunodeficiency, kidney disease, or lead pipes in their homes, are particularly at risk from infection. Their bodies' ability to absorb and eliminate contaminants from their bodies may differ from that of people with no such conditions. EPA's Office of Public Health Protection has information on the health risks of infection by Cryptosporidium and other microbial contaminants available from the Safe Drinking Water Hotline (800-426-4791).

**When does my water come from?**  
Our water source is the Santa, Tallahatchie and Wisconsin Aquifers along with 1 connection with The City of Seaford.

**Source water assessment and its availability**  
Our water comes from an underground aquifer known as The Santa System. You can view a copy of our Source Water Assessment at The City of Olive Branch with the following address: 662-893-5302.

**Drinking water, including bottled water, may occasionally be expected to contain at least small amounts of some contaminants.** The presence of contaminants does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's (EPA) Safe Drinking Water Hotline (800-426-4791).

**The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells.** As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and, in some cases, radioactive material, and may pick up substances resulting from the presence of animals or from human activity. Individual contaminants, such as viruses and bacteria, that may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife discharges, such as bird and animal waste, which can be naturally occurring or result from urban storm water runoff, industrial, or domestic waste water discharges, oil and gas production, mining, or farming; pesticides and herbicides, which may come from a variety of sources such as agriculture, urban storm water runoff, and residential uses; organic chemical solvents, including synthetic and volatile organic chemicals, which are byproducts of industrial processes and petroleum production; and radon, which can be naturally occurring in water. In order to ensure that tap water is safe to drink, EPA prescribes regulations that limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which means provide the same protection for public health.

**How can I get involved?**  
The Mayor and Board of Aldermen hold regular business meetings the first and third Tuesday of each month at 6:00 PM in the Municipal Court Room located at 6900 Highway 51. For more information about these meetings contact The City Clerk at 662-893-9111.

**Monitoring and reporting of compliance data violations**  
In accordance with the Radonocell Rule, all community public water supplies were required to sample quarterly for radonocell beginning January 2007 through December 2007. Your public water supply complied sampling by the scheduled date. However, during an audit of the Mississippi State Department of Health Radiological Health Laboratory, the Environmental Protection Agency (EPA) requested analysis and reporting of radonocell compliance samples and required further action. Although this was not a violation of the public water supply, MSDEH was required to issue a violation. This policy is not part of the public water supply but is a requirement of the monitoring and reporting of radonocell compliance. Compliance & Enforcement, Office of Public Water Supply, at 662-893-9111.

**The water system recently violated a drinking water standard.** Even though this was not an emergency, we as customers, you have a right to know what happened, what you should do, and what we are doing to correct the situation.

**We are required to monitor your drinking water for specific contaminants on a monthly basis.** Results of regular monitoring are an indicator of whether or not our drinking water meets health standards. The law requires that field samples must be collected within 24 hours when notified of a Total Trihalomethanes (THM) or Total Trihalomethanes (TTHM) violation. During May of 2012, we collected two (2) of these (2) regular samples by 3:15:00 PM.

**What should I do?**  
There is nothing you need to do at this time.

**What happened and what is being done to correct the violation?**  
The following specifies the CORRECTIVE ACTIONS that public water supply has taken in response to this violation. Additional samples were collected and all samples were CLEARED.

**For more information please contact Jackie Green, water operator Jackie Green at 904-622-2477 or Samuel P. Baker, City Clerk at 662-893-9111, Office at 9200 Pigeon Root Rd., Olive Branch, MS 38854.**

**The notice is being sent to you by The City of Olive Branch, Business PWS ID # 0170032.**

**To comply with the "Regulation Governing Fluoridation of Community Water Supplies,"** the City of Olive Branch is required to report certain results pertaining to fluoridation of our water system. The number of gallons in the previous calendar year in which average fluoride sample results were within the optimal range of 0.7-1.2 was 12. The percentage of fluoride samples collected in the previous calendar year that was within the optimal range of 0.7-1.2 was 100%.

**Additional Information for Lead**  
If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. BRIDGETOWN 0170032 is responsible for providing high quality drinking water, but cannot control the quality of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline at: <http://www.epa.gov/water/lead.html>

**Water Quality Data Table**

In order to assure that your water is safe to drink, EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. The table below lists all of the drinking water contaminants that we checked during the calendar year of this report. Although many water contaminants were tested, only those substances found below were found in your water. All sources of drinking water contain naturally occurring contaminants. At low levels, these substances are generally not harmful to our drinking water. However, if you have a severely immunodeficient person, such as a child, in your household, you may wish to consult with your doctor about the possibility of infection by Cryptosporidium or other microbial contaminants. The EPA or the State requires us to monitor for certain contaminants in our drinking water and to report the results of these monitoring activities. This information is provided to you for your information. In this table you will find items and substances that may be harmful to you. To help you better understand these items, we have provided the following information:

Contaminant	Unit	Concentration	Health Effects	Source	Year	Notes
1,1-Dichloroethene (ppb)	70	70	0.5	NA	2012	Discharge from industrial process
1,2-Dichloroethene (ppb)	70	70	0.5	NA	2012	Discharge from industrial process
1,3-Dichloroethene (ppb)	16	16	0.5	NA	2012	Discharge from industrial process
1,4-Dichloroethene (ppb)	9	9	0.5	NA	2012	Discharge from industrial process
1,5-Dichloroethene (ppb)	400	400	0.5	NA	2012	Discharge from industrial process
1,6-Dichloroethene (ppb)	15	15	0.5	NA	2012	Discharge from industrial process
1,7-Dichloroethene (ppb)	6	6	0.5	NA	2012	Discharge from industrial process
1,8-Dichloroethene (ppb)	7	7	0.5	NA	2012	Discharge from industrial process
1,9-Dichloroethene (ppb)	106	106	0.5	NA	2012	Discharge from industrial process
2,1-Dichloroethene (ppb)	6	6	0.5	NA	2012	Discharge from industrial process
2,2-Dichloroethene (ppb)	200	200	0.5	NA	2012	Discharge from industrial process
2,3-Dichloroethene (ppb)	6	6	0.5	NA	2012	Discharge from industrial process
2,4-Dichloroethene (ppb)	2	2	0.5	NA	2012	Discharge from industrial process
2,5-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
2,6-Dichloroethene (ppb)	3	3	0.5	NA	2012	Discharge from industrial process
2,7-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
2,8-Dichloroethene (ppb)	100	100	0.5	NA	2012	Discharge from industrial process
2,9-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
3,1-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
3,2-Dichloroethene (ppb)	1	1	0.5	NA	2012	Discharge from industrial process
3,3-Dichloroethene (ppb)	200	200	0.5	NA	2012	Discharge from industrial process
3,4-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
3,5-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
3,6-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
3,7-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
3,8-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process
3,9-Dichloroethene (ppb)	0	0	0.5	NA	2012	Discharge from industrial process

Postage Statement - Standard Mail

2013 JUN 28 PM 4: 08

Post Office: Note Mail Arrival Date & Time (Do Not Round-Stamp)

6/26/13 3:30

Mailler section: Permit Holder's Name and Address, Telephone, Name and Address of Mailing Agent, Telephone, Name and Address of Individual or Organization for Which Mailing is Prepared.

Mailing section: Post Office of Mailing, Processing Category, Mailing Date, Federal Agency Cost Code, Statement Seq. No., No. and Type of Containers, Type of Postage, Weight of a Single Piece, Combined Mailing, Total # of Pieces in Mailing, Total Weight, Permit #, For Mail Enclosed within Another Class.

Postage section: Parts Completed, Letter-size or flat mailpiece contains DVD/CD or other disk, Subtotal Postage, Price at Which Postage Affixed, Incentive/Discount Flat Dollar Amount, Fee Flat Dollar Amount, Net Postage Due.

USPS Use section: Additional Postage Payment, Total Adjusted Postage Affixed, Total Adjusted Postage Permit Imprint, Total Adjusted Postage Simplified Addressing (EDDM).

Certification section: Incentive/Discount Claimed, The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal.

USPS Use Only section: Weight of a Single Piece, Total Pieces, Total Postage, Presort Verification Performed?, Date Mailed, Contact, Round Stamp Payment Date, USPS Employee's Signature.

Postage Statement - Standard Mail

RECEIVED-WATER SUPPLY  
2013 JUN 28 PM 4:08

Post Office: Note Mail Arrival Date & Time  
(Do Not Round-Stamp) 3:30  
6/26/13 15:50

Mailier	Permit Holder's Name and Address and Email Address, if Any OB Public Works Kush Shah 9200 Pigeon Roost Rd Olive Branch, MS 38654-2421	Telephone 901-344-8169	Name and Address of Mailing Agent (if other than permit holder) directFX Solutions Chris Warner 601 N Third Street Memphis, TN 38107-3645	Telephone 901-344-8169	Name and Address of Individual or Organization for Which Mailing is Prepared (if other than permit holder)
	CAPS Cust. Ref. No. CRID		CRID		CRID

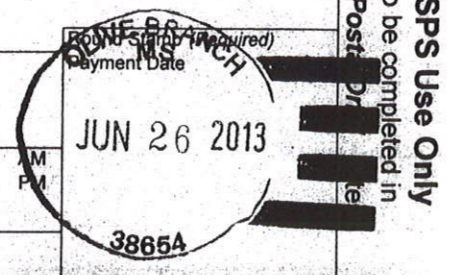
Mailing	Post Office of Mailing Olive Branch, MS 38654-0000	Processing Category <input checked="" type="checkbox"/> Letters <input type="checkbox"/> Catalogs <input type="checkbox"/> Flats <input type="checkbox"/> Marketing Parcels <input type="checkbox"/> Parcels - Machinable <input type="checkbox"/> Parcels - Irregular <input type="checkbox"/> CMM	Mailier's Mailing Date Jun 24, 2013	Federal Agency Cost Code	Statement Seq. No. 105811	No. and Type of Containers 0 Sacks 1 ft. Letter Trays 0 2 ft. Letter Trays 1337 EMM Letter Trays 0 Flat Trays 0 Pallets 0 Other
	Type of Postage <input checked="" type="checkbox"/> Permit Imprint <input type="checkbox"/> Precanceled Stamps <input type="checkbox"/> Metered	Weight of a Single Piece 0.0250 pounds	Combined Mailing <input type="checkbox"/> Mixed Class <input type="checkbox"/> Single Class	Total # of Pieces in Mailing 11,641	Total Weight 291.0250	% samples.
Permit # 32	For Mail Enclosed within Another Class <input type="checkbox"/> Periodicals <input type="checkbox"/> Mailpiece is a product sample.	<input type="checkbox"/> Bound Printed Matter <input type="checkbox"/> Library Mail <input type="checkbox"/> Media Mail <input type="checkbox"/> Parcel Post				

For Automation Pieces, Enter Date of Address Matching and Coding 06/14/2013	For Carrier Route Pieces, Enter Date of Address Matching and Coding 06/14/2013	For Carrier Route Pieces, Enter Date of Carrier Route Sequencing 06/14/2013	For Pieces Bearing a Simplified Address Enter Date of Delivery Statistics File or Alternative Method
Move Update Method: <input type="checkbox"/> Ancillary Service Endorsement <input type="checkbox"/> NCOA <input type="checkbox"/> ACS <input type="checkbox"/> Alternative Method <input type="checkbox"/> Multiple <input type="checkbox"/> n/a Alternative Address Format <input type="checkbox"/> OneCode ACS			
Parts Completed (Select all that apply) <input checked="" type="checkbox"/> A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> S <input type="checkbox"/> NSA			
<input type="checkbox"/> Letter-size or flat mailpiece contains DVD/CD or other disk.		1	Subtotal Postage (Add Parts Totals) \$2,414.14
2	Price at Which Postage Affixed (Check one). Complete if the mailing includes pieces bearing metered/PC Postage or precanceled stamps. <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither	pcs. x \$	= Postage Affixed -
3	Incentive/Discount Flat Dollar Amount:		-
4	Fee Flat Dollar Amount:		+
5	Permit #	Net Postage Due (Line 1 +/- Lines 2, 3, 4)	\$2,414.14

USPS Use	Additional Postage Payment (State reason) For postage affixed, add additional payment to net postage due; for permit imprint add additional payment to total postage.	Total Adjusted Postage Affixed
	Postmaster: Report Total Postage in AIC 130 (Permit Imprint Only, Excluding Simplified Addressing (EDDM))	Total Adjusted Postage Permit Imprint
	Postmaster: Report Total Postage in AIC 208 (Simplified Addressing (EDDM), Permit Imprint Only)	Total Adjusted Postage Simplified Addressing (EDDM)

Certification	Incentive/Discount Claimed:	Type of Fee:
	The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control. The mailer hereby certifies that all information furnished on this form is accurate, truthful, and complete; that the mail and the supporting documentation comply with all postal standards and the mailing qualifies for the prices and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation. I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.	
Privacy Notice: For information regarding our Privacy Policy visit <a href="http://www.usps.com">www.usps.com</a> .		
Signature of Mailer or Agent	Printed Name of Mailer or Agent Signing Form Chris Warner	Telephone 901-344-8169

USPS Use Only To be completed in non-Postal/One/ sites	Weight of a Single Piece 0.0250 pound	Are postage figures at left adjusted from mailer's entries? If yes, reason: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Total Pieces 11641	Total Weight 324.7839
	Total Postage	
	Presort Verification Performed? (If required) <input type="checkbox"/> Yes <input type="checkbox"/> No	
	I CERTIFY that this mailing has been inspected for each item below if required: (1) eligibility for postage prices claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; (4) payment of annual fee; and (5) sufficient funds on deposit (if required)	
USPS Employee's Signature	Date Mailed Notified	Contact
	By (Initials)	Time
	Print USPS Employee's Name 3865A	



City of Olive Branch

Invoice Date	Invoice Number	P.O. No.	Voucher	Invoice Description	Net Invoice Amount
06/17/13	2013-06		160062	MAILING OF CCR REPORTS BR	2,629.29

Vendor No.	Vendor Name	Check No.	Check Date	Check Amount
1825	U S POSTAL SERVICE	032287	06/19/2013	\$2,629.29

2013 JUN 28 PM 4:08

TYLER FORM PROCESSING

RECEIVED WATER SUPPLY

**City of Olive Branch**  
9200 Pigeon Roost  
Olive Branch, MS 38654  
Account Payable Clearing Account

**VOID AFTER 90 DAYS**

Vendor Number: 1825    Check Date: 06/19/2013    Check Number: 032287    <sup>85-194</sup>/<sub>859</sub>

**\$2,629.29**

Pay \*\*\*\*\*2,629 DOLLARS AND 29 CENTS

To The Order Of: **U S POSTAL SERVICE**

BankPlus

*James R. Record* MP  
*Judy C. Harrington* MP

⑈032287⑈ ⑆065301948⑆ 8020147883⑈

\*See Reverse Side For Easy Opening Instructions\*



**City of Olive Branch**  
9200 Pigeon Roost  
Olive Branch, MS 38654

U S POSTAL SERVICE  
8850 MID-SOUTH AVENUE  
OLIVE BRANCH MS 38654-9998

SO-9712105 • 11Z-VIS