

**Drinking Water
Rules, Sampling & Monitoring
Helena
May 14, 2019**

Instructors

DEQ Rule Managers

*Libby Henrikson
Diane Jordan
Greg Butts
Scott Patterson
Katie Luther*



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U.S. POSTAGE PAID
GREAT FALLS, MT
PERMIT No. 167

Montana Environmental Training Center
MSU-Northern
P.O. Box 7751
Havre, MT 59501



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Rules, Sampling
& Monitoring
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Attention: All surface and groundwater system operators and managers classes 1-5. This class will provide updates on the drinking water rules and regulations related to sampling and monitoring of your public water supply systems.

Drinking Water Rules, Sampling & Monitoring



Helena
May 14, 2019

WHERE: UM Helena College
1115 N. Roberts

COURSE FEE: \$110 **CECs:** 0.8 Water

WHAT: This training session will be helpful to the seasoned operator and someone seeking certification. New rule information as well as refresher information will be provided. **Attend this training in conjunction with the Certification review on May 23 for a more complete preparation for the exam on May 16.**

AGENDA: Tuesday, May 14, 2019

- 7:30 Registration
- 8:00 Regulatory Review - Scott Patterson, DEQ
- 9:00 Consumer Confidence Rule Compliance - Scott Patterson, DEQ
- 9:45 **BREAK**
- 10:00 Completing a Level 1 RTCR Assessment - Libby Henrikson, DEQ
- 11:15 What to Expect During a Level 2 RTCR Assessment - Katie Luther, DEQ
- 12:00 **LUNCH** (on your own)
- 1:00 Nitrate Monitoring, Treatment, Public Health & Compliance - Scott Patterson, DEQ
- 2:30 **BREAK**
- 2:45 CHEM/RAD Sampling Compliance - Diane Jordan, DEQ
- 3:45 DEQ Updates on Waivers & Reminders - Scott Patterson
- 4:00 Montana Water Systems, How Many, What Kind, Treatment Types - Greg Butts, DEQ
- 5:00 Wrap-up & Adjourn

Drinking Water Monitoring REGISTRATION FORM

Helena

REGISTRATION: Registration is **necessary!** Please complete this form and return it with your payment of **\$110.00**. **Note we must have 10 people pre-registered for this class by May 8, 2019 otherwise the class may be cancelled.**

A cancelled registration after **May 8, 2019** will be refunded at 50%. You may call METC at 265-3763 for more information.

Send Registration & Payment to:
METC
MSU-Northern
P. O. Box 7751
Havre, MT 59501

NAME _____

ADDRESS _____

CITY _____

ST _____ ZIP _____

PHONE _____

EMPLOYER _____

E-MAIL _____

Indicate Amount & Method of Payment

Amount \$ _____

[] Check # _____

[] PO # _____

[] Credit Card (**preferred method of payment**)

Card #: _____

Card Name: [] Master Card or [] Visa

Expiration Date: _____

Card Holder Signature: _____

Date: _____