

Annual Lead Service Line Inventory Report
New Jersey Department of Environmental Protection
Division of Water Supply and Geoscience - Water System Operations Element
watersupply@dep.nj.gov



Forms must be submitted to the Water Supply Mailbox with a subject line that includes Water System Name, PWSID and Form Number.

I. System Information

Water System Name:	West Caldwell
PWSID Number:	NJ0721001
Accurate as of:	1-Jul-22

II. Contact Information for Owner/ Licensed Operator of Record Completing the Form

Contact Name:	John Pressler
Contact Title:	Licensed Operator
Contact Phone:	973-226-2300x3401
Contact Email:	jpressler@westcaldwell.com

III. Inventory Information

Owner of Service Lines: System Property Owner Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	145
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	627
V. Non-lead	<input checked="" type="checkbox"/>	3076

# of LSLs replaced this year:	9	Total # of SLs	3848
# of LSLs replaced 07/22/2021-06/30/2022:	11 8%	# of known SLs before replacement activities	1965
# of LSLs replaced 07/01/2022-06/30/2023:	0 0%	# of known Unknowns before replacement	1731
# of LSLs replaced 07/01/2023-06/30/2024:	0 0%	# of known LSLs	145
# of LSLs replaced 07/01/2024-06/30/2025:	0 0%	# of LSLs to be replaced annually:	15
# of LSLs replaced 07/01/2025-06/30/2026:	0 0%	# of Unknowns identified 07/22/2021-06/30/2022:	15
# of LSLs replaced 07/01/2026-06/30/2027:	0 0%	# of Unknowns identified 07/01/2022-06/30/2023:	0
# of LSLs replaced 07/01/2027-06/30/2028:	0 0%	# of Unknowns identified 07/01/2023-06/30/2024:	0
# of LSLs replaced 07/01/2028-06/30/2029:	0 0%	# of Unknowns identified 07/01/2024-06/30/2025:	0
# of LSLs replaced 07/01/2029-06/30/2030:	0 0%	# of Unknowns identified 07/01/2025-06/30/2026:	0
# of LSLs replaced 07/01/2030-06/30/2031:	0 0%	# of Unknowns identified 07/01/2026-06/30/2027:	0
Total # of service lines replaced:	11 8%	# of Unknowns identified 07/01/2027-06/30/2028:	0
		# of Unknowns identified 07/01/2028-06/30/2029:	0
		# of Unknowns identified 07/01/2029-06/30/2030:	0
		# of Unknowns identified 07/01/2030-06/30/2031:	0
		Total # of Unknowns identified:	15

Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?		
Optional Question	Yes	No
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

IV. Certifications

By submitting this form, I have verified and certify the information listed in this form is true and accurate to the best of my knowledge and belief.

John Pressler	7/13/22	Operator
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
jpressler@westcaldwell.com	973-226-2300x3401	579121
Email	Phone Number	License Number (if LO)

This form must be submitted by the Water System Owner or its Licensed Operator of Record.