

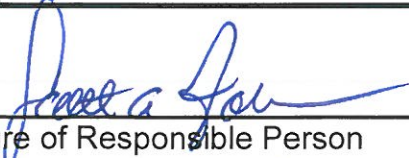
VERIFICATION FORM FOR COMMUNITY PUBLIC WATER SYSTEMS CLAIMING NO LEAD SERVICE LINES

The owner or operator of all community public water systems must identify and map areas of their distribution system that are known or are likely to contain lead service lines. Systems must submit a copy of the applicable map to the Ohio Department of Health and the Ohio Department of Job and Family Services. Systems must also submit a report to the director containing at least both of the following: (1) The applicable map with narrative, and (2) A list of sampling locations used to collect samples as required by Ohio Revised Code (ORC) Section 6109.121 and any rules adopted thereunder, including contact information for the owner and occupant of each sampling site.

Should a water system determine no lead service lines exist in their distribution system, they must provide information stating they reviewed, at the minimum, historical permit records and local ordinances, distribution maintenance records and information pertaining to installation dates or materials for all services lines. This information must be verified below.

I HEREBY CERTIFY THAT THE FOLLOWING METHOD(S) WERE USED TO DETERMINE NO LEAD SERVICE LINES EXIST IN THIS WATER SYSTEM'S DISTRIBUTION SYSTEM, AS REQUIRED BY ORC 6109.121(F):

LEAD SERVICE LINE VERIFICATION
<p>This PWS states they have no lead service lines and has reviewed the following information (select one or more of the following):</p> <ul style="list-style-type: none"><input type="checkbox"/> Historical permit records and/or local ordinances<input type="checkbox"/> Distribution maintenance records (i.e. meter replacement, waterline break repairs)<input checked="" type="checkbox"/> Information pertaining to installation dates for all service lines (i.e. after 1986 when lead services lines were banned)<input type="checkbox"/> Service line material of all service lines is known (i.e. all service lines are known to be PVC)

	<u>3.6-17</u>	PWS NAME: <u>PROGRESSIVE FOAM</u>
Signature of Responsible Person	Date	PWS ID: <u>OH 7949712</u>
<u>John A. Foreman, Director of Manufacturing</u>		COUNTY: <u>Tierrasanta</u>
Printed Name and Title of Responsible Person		

For Ohio EPA use only:

Date Verification Rec'd: _____

Ohio EPA
Division of Drinking and Ground Waters
Southeast District Office
2195 Front St.
Logan, Ohio 43138

March 6, 2017 <Via e-mail>

RE: Lead and Copper Mapping for PWS#7949712

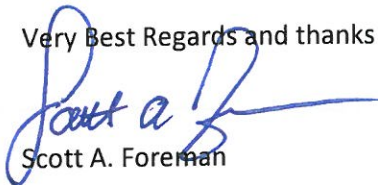
We recognize that buildings in Ohio built prior to 1998 or that use plumbing material or solder manufactured before 1998 may have materials with greater than 8% lead and are at a higher risk of contributing lead to the drinking water than materials manufactured after 1998. In addition, buildings built and plumbing materials manufactured after 2014 were required to have less than 0.25% lead by weight and have the lowest risk for contributing lead to the drinking water. It should be noted however that, although prohibited, some use of leaded solder or leaded components may have occurred after the prohibitions became effective.

The original Progressive Foam Technologies building was constructed in 1996, with additions in 1997-1998 and 2003. There are no Lead service lines entering/within the building. As you can see from the included plumbing map, our distribution system is fairly simple. We have a small domestic well, pressure tank, no treatment and only two main restroom/breakroom areas being serviced via single feeds to both ends of the plant.

Progressive Foam had a Lead exceedance in 2013. As Phase I of our remediation plan, a total replacement of plumbing fixtures and valves was recommended prior to a total conversion to plastic pipe (Phase II, if required). Once Phase I work was completed, Lead and Copper issues were eliminated and Progressive Foam Technologies has subsequently been returned to an annual monitoring schedule. We are confident that Phase I work eliminated remaining sources of Lead within our facility.

Should you have any further questions, please feel free to contact me directly.

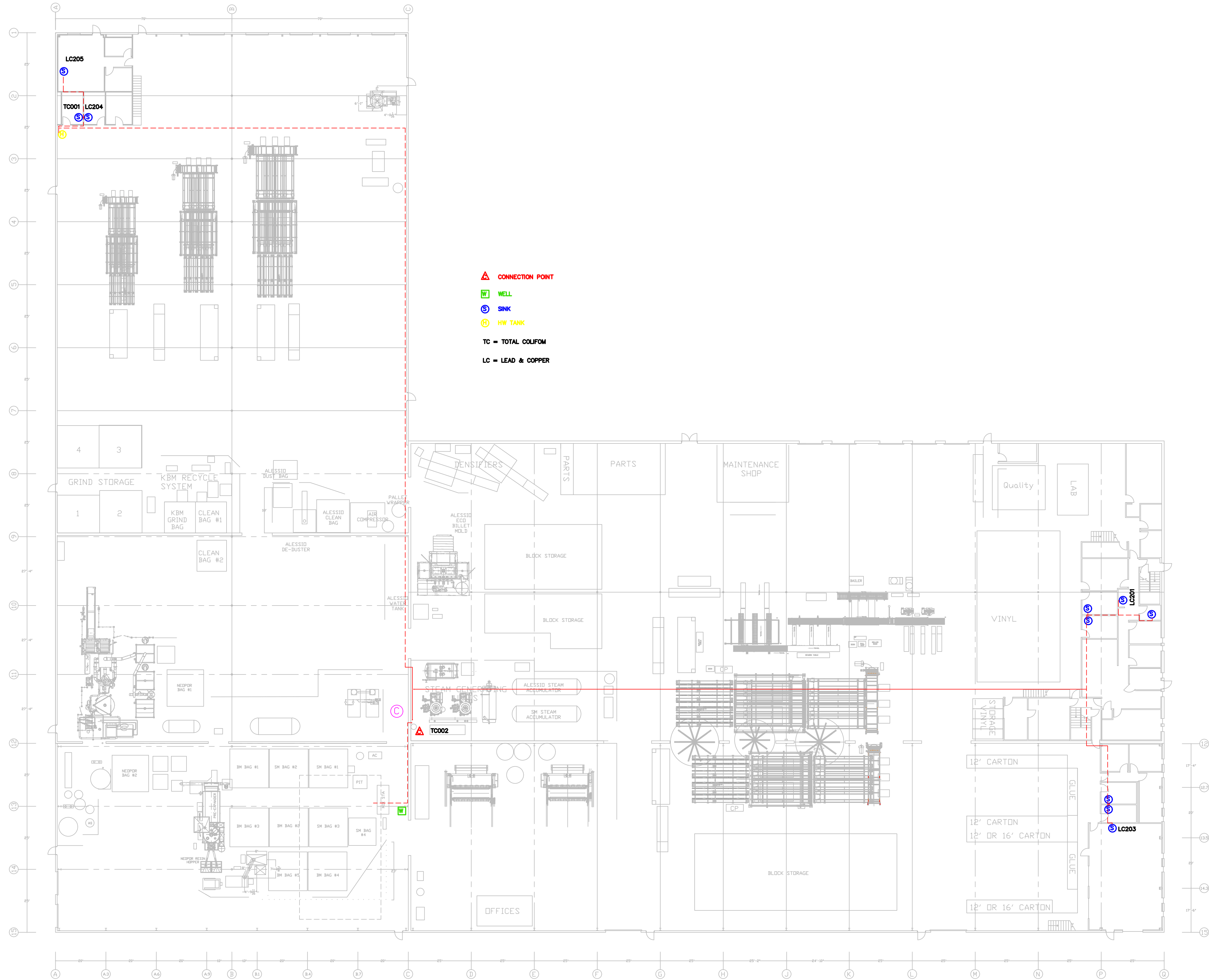
Very Best Regards and thanks for your help,



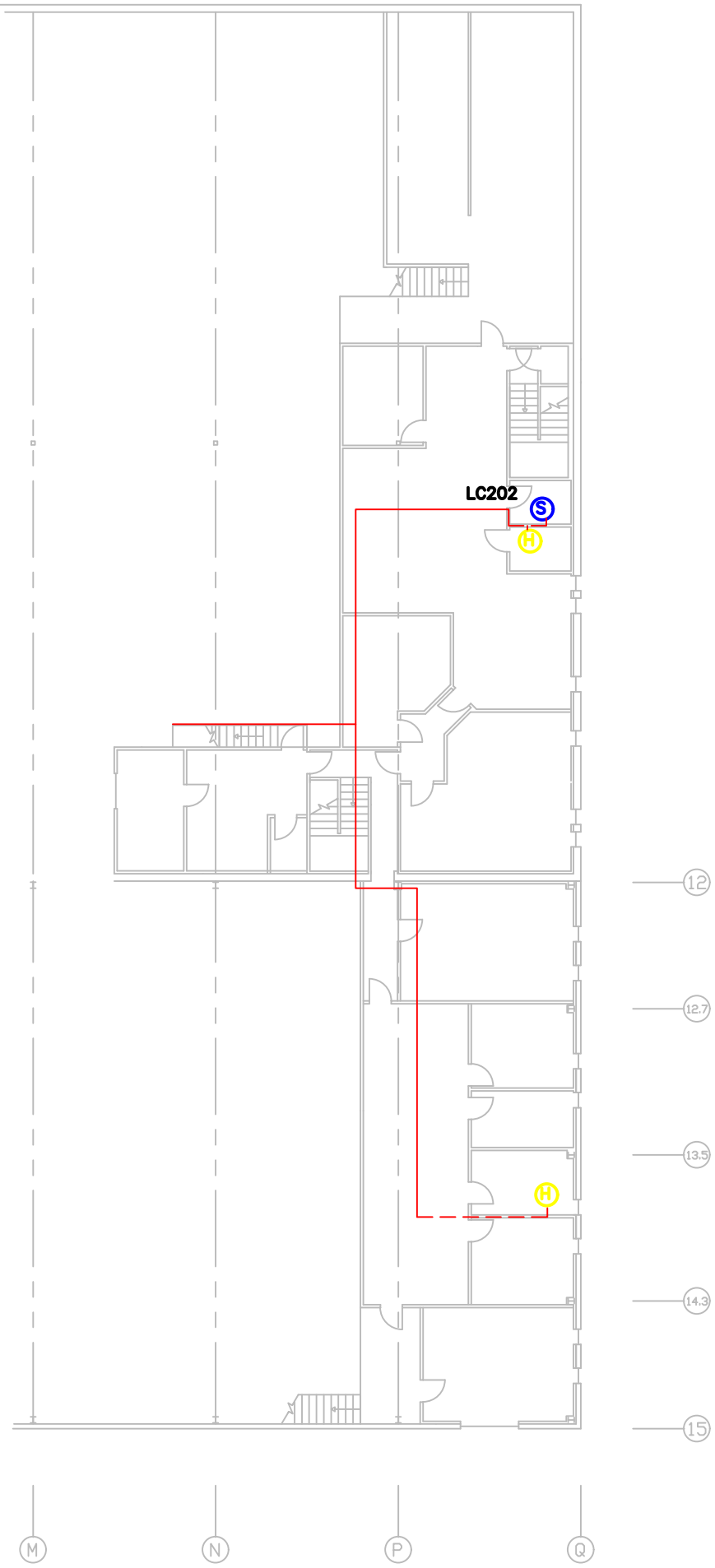
Scott A. Foreman

Director of Manufacturing
Progressive Foam Technologies, Inc.
Office- 330-756-3349
Cell- 330-795-0590
Scott@Progressivefoam.com

CC: Ohio Department of Health (BEH@odh.ohio.gov)
Ohio Department of Jobs and Family Services (angela.kaiser@jfs.ohio.gov)



REV	DATE	DESCRIPTION	BY
A	04/30/14	Back flow preventor and solenoid valve not changed	SMR
B	01/23/17	Revised note for water supply	SMR
C	01/23/17	Includes domestic water piping layout	SMR
D	03/03/17	Includes TC and LC information	SMR



SECOND FLOOR

TOLERANCES "UNLESS" OTHERWISE NOTED .XX ± .010" .XXX ± .005" ANGLE ± 1/4" FRACTION ± 1/64	<div>ProgressiveFoam</div> <div>TECHNOLOGIES, INC.</div>		DRAWN BY	DATE
	TITLE DOMESTIC PIPING PLAN BEACH CITY FACILITY		SMR	3/3/14
			CHECKED	DATE
			SAF	3/21/14
			APPROVED	DATE
			SMR	3/21/14
			SCALE	1=1
			SHEET	

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NOTES:

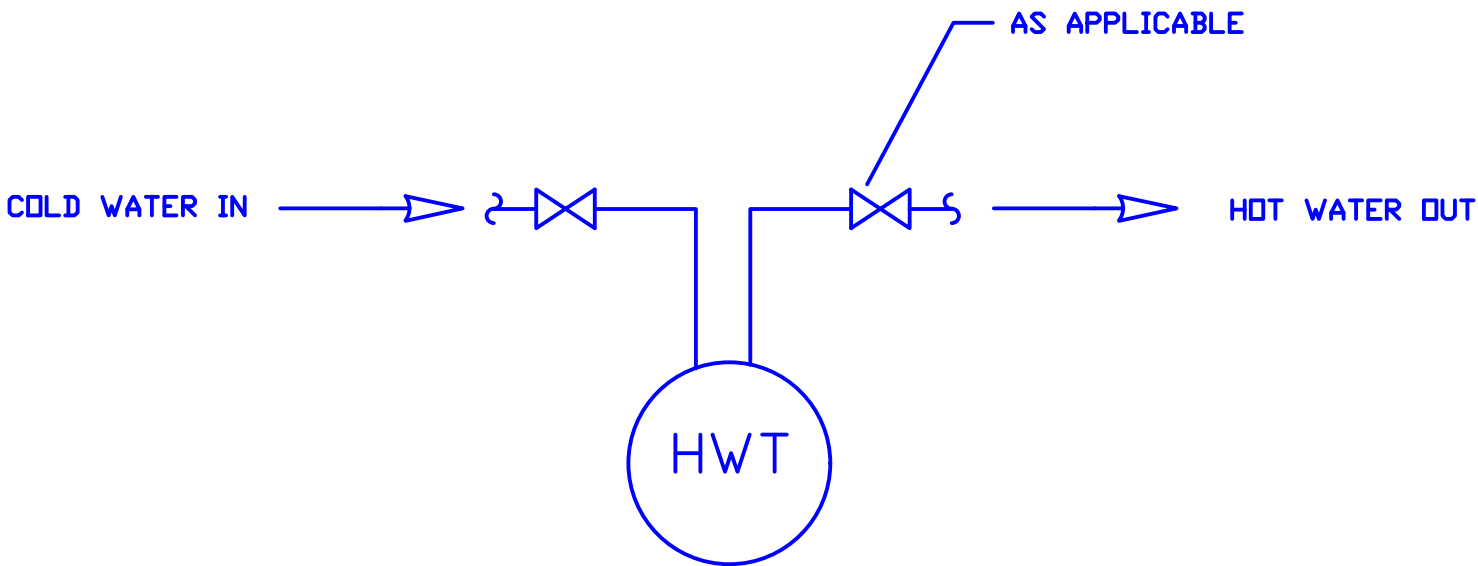
1. PHASE I: PHASE I CONSISTS OF REPLACING EXISTING SUSPECT COMPONENTS INCLUDING BUT NOT LIMITED TO VALVES AND FIXTURES THEN RETEST AND EVALAUTE THE RESULTS. IF THE RESULTS PROVE FAVORABLE THEN WE WILL CONTINUE TO TEST AND MONITOR IN ACCORDANCE WITH APPROVED METHODS AND PROCEDURES. IF THE RESULTS ARE UNFAVORABLE WE WILL PROCEED WITH PHASE II AS DETAILED BELOW AND AS PER THE ATTACHED DRAWING.

2. PHASE II: PHASE II CONSISTS OF REPLACING ALL SINK SUPPLY PIPING WITH PLASTIC OR LEAD FREE COMPONENTS.

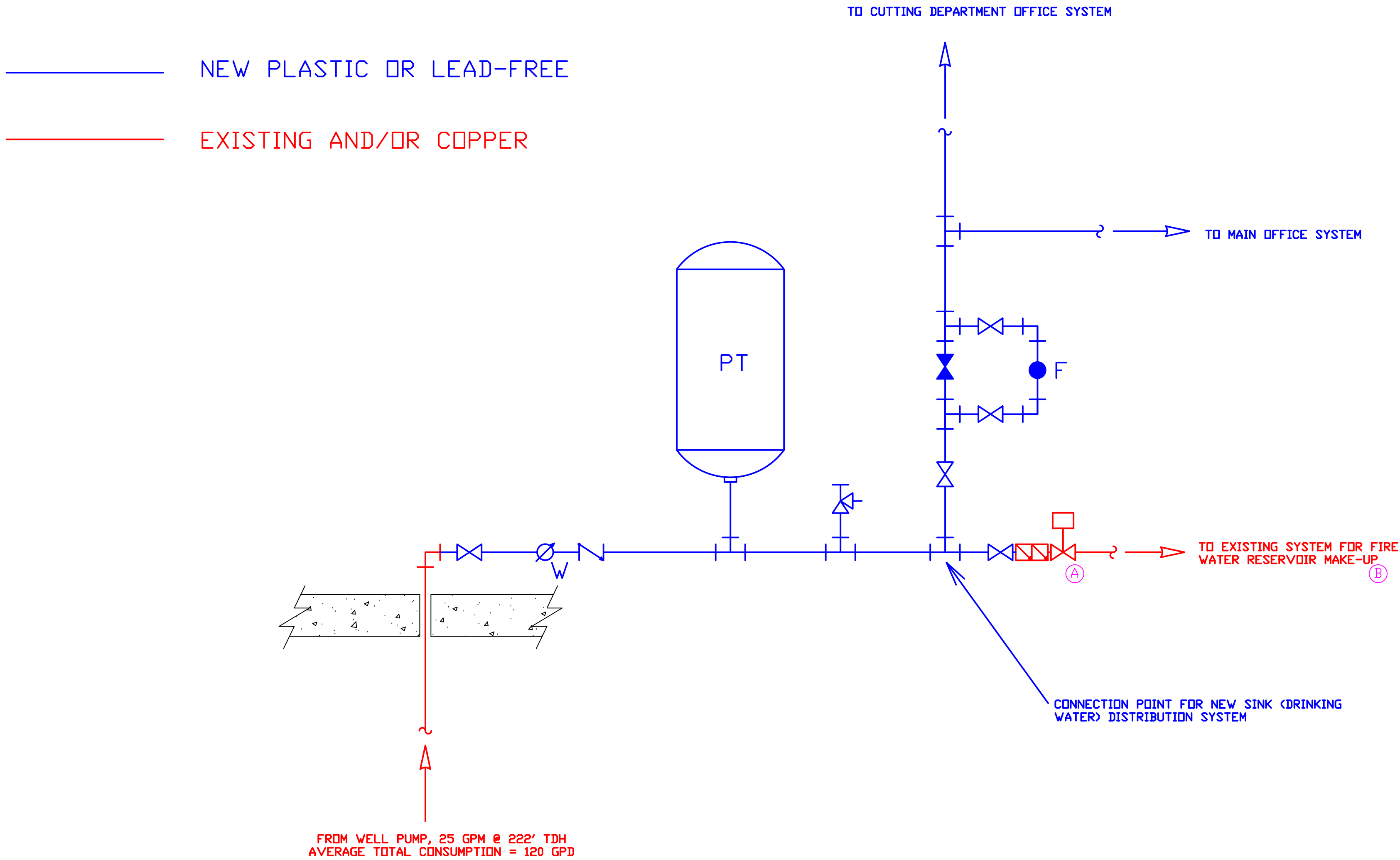
2A. ALL DESIGNS, COMPONENTS, TESTING AND STERILIZATION SHALL BE DONE IN ACCORDANCE WITH THE APPLICABLE SECTIONS OF THE DEPA GUIDELINES FOR DESIGN OF SMALL PUBLIC GROUND WATER SYSTEMS, FOURTH EDITION.

2B. THE PURPOSES OF THIS DIAGRAM IS TO SHOW SYSTEM CHANGES THAT ALLOW FOR THE SEPARATION OF DOMESTIC SINK (DRINKING WATER) FROM TOILET WATER AND THE ASSOCIATED COMPONENTS. THE COMPONENTS AND CONFIGURATION ARE SUBJECT TO CHANGE BASED ON ACTUAL HARDWARE AND ROUTING. UNDER ALL CIRCUMSTANCES THE REQUIREMENTS OF NOTE 1 ABOVE SHALL BE MAINTAINED.

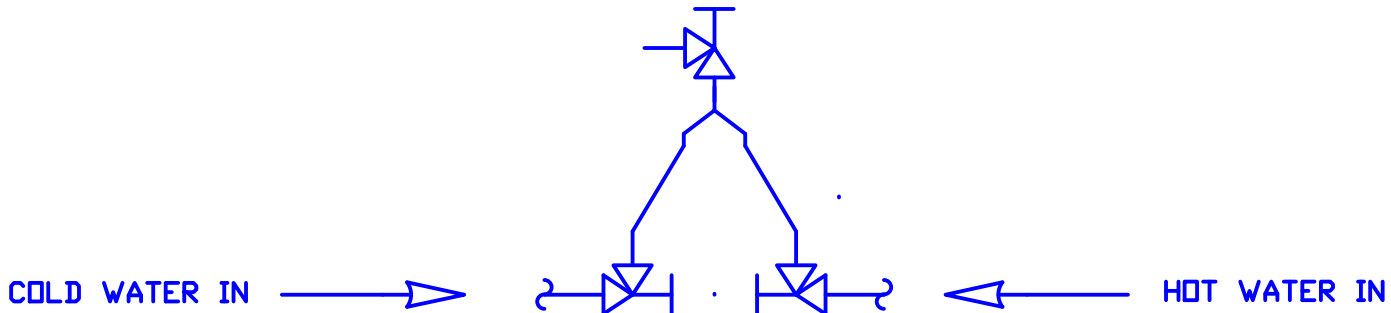
2C. ALL NEW COMPONENTS SHALL CONSIST OF NON-METALLIC MATERIALS OR LEAD-FREE AS APPLICABLE.



CONNECTION DETAILS
AT EACH HOT WATER
HEATER (3 TYPICAL)



CONNECTION DETAILS AT
MAIN SUPPLY POINT



CONNECTION DETAILS AT
EACH SINK (11 TYPICAL)

TOLERANCES "UNLESS" OTHERWISE NOTED .XX ± .010" .XXX ± .005" ANGLE ± 1/4" FRACTION ± 1/64	ProgressiveFoam TECHNOLOGIES, INC.		DRAWN BY	DATE
	TITLE DOMESTIC PIPING PLAN BEACH CITY FACILITY		SMR	3/3/14
			CHECKED	DATE
			SAF	3/21/14
			APPROVED	DATE
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			SCALE	NTS
			SHEET	2 of 2