# Richland County Pine Valley Sub-Committee

#### October 15th 2025

#### **NOTICE OF MEETING**

Please be advised that the Richland County Pine Valley Sub-Committee will convene on Monday, October 20, 2025 at 5pm in the Richland County Board Room of the Courthouse at 181 West Seminary Street, Richland Center, WI 53581.

Information for attending the meeting virtually (if available) can be found at the following link: https://administrator.co.richland.wi.us/minutes/pine-valley-committee/. If you have any trouble accessing the meeting, please contact MIS Director Jason Marshall at 608-649-5926 (phone) or Jason.marshall@co.richland.wi.us (email).

- 1. Call to Order
- 2. Roll Call
- 3. Approval of Ágenda and Verification of Posting
- 4. Approval of Minutes of the August 18, 2025 Pine Valley Sub-Committee Meeting
- 5. Public Comment
- 6. Election of the Chair and Vice Chair positions.
- 7. Administrator Census
- 8. Pine Valley Financials
  - a. Overall Financial Standing August and September
- 9. Administrator's Report: Update on: Water,
- 10. Adjourn

A quorum may be present from other Committees, Boards, or Commissions. No committee, board or commission will exercise any responsibilities, authority or duties except for the Pine Valley Sub-Committee.

#### **Richland County**

#### Pine Valley Sub Committee

The Richland County Pine Valley Committee convened on Monday, August 18, 2025, in person and virtually at 6:00 PM in the County Boardroom of the Richland County Courthouse.

Call to Order: Committee Acting Chair Mark Gill called the meeting to order at 6:02PM.

Committee Members present: Mark Gill and Pat Rippchen, Sandra Kramer and Marc Couey.

Committee Member(s) absent: Gary Manning and Mary Miller.

County Board Members present: Alayne Hendricks.

**Attendants:** Staff present included Brittany Paulus, Pine Valley Administrator; Angela Wall: HR Generalist at Pine Valley

**Approval of Agenda and Verification of Posting:** Motion by Sandra Kramer second by Mark Couey to approve agenda. Motion carried and agenda declared approved.

Approval of Minutes of the July 21, 2025 Pine Valley Sub-Committee Meeting: No additions, corrections or notes were identified. The minutes of the July 21, 2025 meeting were approved as written.

**Public Comment:** No Public Comment

**Pine Valley Census Recap:** Brittany reviewed the census report for July, Average of 69, but currently at its highest thus far 73 with one in the hospital. CBRF averaged 14 currently 15.

**Pine Valley Financials – Accounts Receivable Trend Report:** Brittany reviewed the account receivable trend report. The Days Revenue in A/R for July 34.32 Target is to be below 40.

**Pine Valley Financials-Cash Flow:** Brittany Highlighted cash receipts \$1,081,732.30 and payments adding to \$790,462.77.

**Pine Valley Financials-Consideration of Vouchers:** Brittany went over checks that were out of the normal. Motion by Sandra Kramer second by Marc Couey to approve the vouchers as presented. Motion carried.

**Pine Valley Financials-Aging Report:** Brittany went over aging and went over the liens filed and that we are receiving payments from denied claims.

**Administrator's Report:** Update re: Pharmacy Provider: They have been to the building, we received out medication carts, they will be out on August 20, 2025, to go over all things with staff. Things are moving forward.

Update re: Water Project: Additional inspection of the reservoir was done by a robot. It was determined that the reservoir does not need to be replaced; however, recommendations for maintenance will be/have been made. Should be receiving the report soon of the inspection with photos and videos.

State Surveyor Activity: Brittany stated that we are in compliance.

Mark Gill inquired whether PV is still using contracted staff for Nursing. Brittany confirmed the use of contracted staff continues, noting a lack of applicants for RN and LPN positions. Informed the board that we are anticipating reports from Tess following the submission of the corrected Job description.

Note Mark Gill states that they are seeing improvements since the beginning of the year. Marc Couey also notes that in the last 2 years ago he has seen major positive change overall. Census and financials have gotten much better. Noting that we should continue to keep up the great work as money is on the positive side.

**Adjourn:** Motion by Sandra Kramer second by Mark Gill to adjourn. Motion carried and meeting adjourned at 6:46 PM.

Next Meeting: Monday, August 18, 2025 at 6:00 PM.

Brittany Paulus, Pine Valley Administrator

Month	SNF Budgeted Census	SNF Average Census (Actual)	SNF Variance (±)	CBRF Budgeted Census	CBRF Average Census (Actual)	CBRF Variance (±) Commen	ts / Notes
January	64	64	0	14.75	16	1.25	,
February	64	68	4	14.75	15	0.25	
March	64	66	2	14.75	15	0.25	
April	64	65	1	14.75	15	0.25	
May	64	67	3	14.75	15	0.25	
une	64	70	6	14.75	15	0.25	
uly	64	69	5	14.75	14	0	
August	64	73.45	9	14.75	14	Û	
ieptember	64	68.43	4	14.75	14.56	0 Hospital leaves	
October	64			14.75	255	o Hospital leaves	
November	64			14.75			
December	64			14.75			
Average YTD							

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Start Date: 08/01/2025 End Date: 08/31/2025

Summary By Day				<del>.</del>							olect Fayers	by rayer ry	pe(s)
	<u>.</u>	Inhouse Days	Hospital Leave Days	Therapeutic Leave Days	Pre-Admit Days	DC/ Expired Days	Total Billable Days	Inhouse Non-Billable Days	Hospital Non-Billable Leave Days	Nou-Rillable	DC/Expired Non-Billable Days	Total Non-Billable Days	Census
08/01/2025		71	0	0	0	0	71	0	0	0			
08/02/2025		70	0	0	0	0	70	Ĭ	0	1	-	1	72
08/03/2025		70	0	0	0	0	70	0	1	0	_	1	71
08/04/2025		72	0	0	0	0	72	0	0	0	•	1	71
08/05/2025		72	0	0	0	0	72	o	0	0	•	0	72
08/06/2025		72	0	0	0	0	72	0	0	0	•	0	72
08/07/2025		73	0	0	0	0	72	ő	0	0	•	0	72
08/08/2025		73	0	0	0	0	73	0	0	0	•	0	73
08/09/2025		73	0	0	0	0	73	0	0	0	0	0	73
08/10/2025		73	0	0	0	0	73	0	0	0	0	0	73
08/11/2025		73	0	. 0	0	0	73	0	0	0	0	0	73
08/12/2025		73	0	0	0	0	73	0	0	0	0	0	73
08/13/2025		72	0	0	0	0:	73 72 i	0	0	0	0	0	73
08/14/2025		70	0	0	0	0	72	0	2	_	1	1	73
08/15/2025		71	0	0	0	0	70	0		0	0	2	72
08/16/2025		72	0	0	0	0	72	0	2 1	0	0	2	73
08/17/2025		72	0	0	0	0	72 72	0		0	0	1	73
08/18/2025		73	0	0	0	0	73	0	, 1 1	0	0	1	73
08/19/2025		73	0	0	0	0	73	0		0	0	1	74
08/20/2025		74	0	0	0	0	74	0	1	0	0	1	74
08/21/2025		74	0	0	0	0	74	0		0	0	0	74
08/22/2025		75	0	0	0	0	75	0	1	0	0	1	75
08/23/2025		75	0	0	0	0	75	0		0	0	0	75
08/24/2025		74	0	0	0	0	74	0	0	0	0	0	75 
08/25/2025		74	0	0	0	0	74	0	0	0	1	1	75
08/26/2025		75	0	0	0	0	75	0		0	0	0	74
08/27/2025		76	0	0	0	0		0	0	0	0	0	75
08/28/2025		75	0	0	0	0	76 75	0	0	0	0	0	76
08/29/2025		75	0	0	0	0:	75 75		0	1	0	1	76
08/30/2025		75	0	0	0	0	1	0	0	0	1	1	76
08/31/2025		75	0	0	0	0:	75		. 0	0	0	0	75
	Total:						75	0	0	0	0	0	75
	Total:	2,265	0	0	0	0	2,265	0	10	2	4	16	2,281

Start Date: 09/01/2025 End Date: 09/30/2025

Summary By Day			-										
		Inhouse Days	Hospital Leave Days	Therapeutic Leave Days	Pre-Admit Days	DC/ Expired Days	Billable	Inhouse Non-Billable Days	Hospital Non-Billable Leave Days	Therapeutic Non-Billable Leave Days	DC/Expired Non-Billable Days	Total Non-Billable Days	Total Census Days
09/01/2025		74	0	0	0	0	74	0	0	0	1	1	75
09/02/2025		73	0	0	0	0		ا آ	0	0		1	74
09/03/2025		72	0	0	0	0		0	1	0		1	73
09/04/2025		72	0	0	0	o	72		1	0	_	2	74
09/05/2025		71	0	0	0	0		0	2	0	1	3	74
09/06/2025		71	0	0	0	0		0	2	0	0	2	73
09/07/2025		69	0	0	0	o i		0	3	1	0	4	73
09/08/2025		69	0	О	0	0		0	2	0	2	4	73
09/09/2025		68	0	0	0	o	68	0	3	0	0	3	71
09/10/2025		68	0	0	0	0	68	0	3	0	0	3	71
09/11/2025		70	0	0	0	0	70	0	2	0	0	2	72
09/12/2025		67	0	0	0	0	67	0	2	0	3	5	72
09/13/2025		66	0	0	0	0	66	0	2	1	0	3	69
09/14/2025		67	0	0	0	0	67	0	2	0	0	2	69
09/15/2025		68	0	0	0	0	68	0	1	0	0	1	69
09/16/2025		67	0	0	0	0	67	0	2	0	1	3	70
09/17/2025		69	0	0	0	0	69	0	1	0	0	1	70
09/18/2025		68	0	0	0	0 :	68	0	1	0	1	2	70 70
09/19/2025		67	0	0	0	0	67	0	2	0	0	2	69
09/20/2025		66	0	0	0	0	66	0	2	1	0	3	69
09/21/2025		66	0	0	0	0	66	0	2	1	o	3	69
09/22/2025		67	0	0	0	0	67	0	2	0	0	2	69
09/23/2025		68	ò	0	0	0	68	0	1	0	0	1	69
09/24/2025		67	0	0	0	0	67	0	1	1	1	3	70
09/25/2025		67	0	0	0	0	67	0	2	0	o ;	2	69
09/26/2025		66	0	0	0	0	66	0	2	0	1	3	69
09/27/2025		66	0	0	0	0	66	0	1	1	- 0 :	2	68
09/28/2025		67	0	0	0	0	67	0	1	0	0	1	68
09/29/2025		68	0	0	0	0	68	0	0	0	1	1	69
09/30/2025	_	69	0	0	0	0	69	0	0	0	0	0	69
	Total:	2,053	0	0	0	0	2,053	0	46	6	14	66	2,119

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Start Date: 08/01/2025 End Date: 08/31/2025

Summary By Day													
	In	nhouse Days	Hospital Leave Days	Therapeutic Leave Days	Pre-Admit Days	DC/ Expired Days	Billable	Inhouse Non-Billable Days	Hospital Non-Billable Leave Days	Therapeutic Non-Billable Leave Days	DC/Expired Non-Billable Days	Non-Billable	Census
08/01/2025		13	1	0	0	0	14	0	0	0	0	<u> </u>	14
08/02/2025		13	1	0	0	0		0	0	0	. 0	0	14
08/03/2025		13	1	0	0	0	14	0	0	0	0	0	14
08/04/2025		13	1	0	0	0	i	0	0	0	0	0	14
08/05/2025		13	1	0	0	0		0	0	0	0	. 0	14
08/06/2025		13	1	0	0	0		0	0	0	0	0	14
08/07/2025		13	1	0	0	0		0	0	0	0	0	14
08/08/2025		12	1	1	0	0		0	0	0	0	0	14
08/09/2025		12	1	1	0	0	14	ō	0	0	0	0	14
08/10/2025		12	1	1	0	0		0	0	0	0	0	14
08/11/2025		13	1	1	0	0		0	0	0	0	0	15
08/12/2025		14	1	0	0	0	15	0	0	0	0	0	15
08/13/2025		14	1	0	0	0	15	0	0	0	0	÷ 0	15
08/14/2025		14	1	0	0	0	15	0	0	0	0	0	15
08/15/2025		14	1	0	0	0	15	0	0	0	0	0	15
08/16/2025		14	1	0	0	0	15	0	0	0	0	0	15
08/17/2025		14	1	0	0	0	15	0	0	0	0	0	15
08/18/2025		14	1	0	0	0	15	0	0	0	0	: o	15
08/19/2025		14	1	0	0	0	15	0	0	0	0	0	15
08/20/2025		13	1	1	0	0	15	0	0	0	0	Ö	15
08/21/2025		13	1	1	0	0	15	0	0	0	0	o	15
08/22/2025		13	1	1	0	0	15	0	0	0	0	0	15
08/23/2025		13	1	1	0	0	15	0	0	0	0	o	15
08/24/2025		13	1	1	0	0	15	0	0	0	0	o	15
08/25/2025		12	1	2	0	0	15	0	0	0	0	o	15
08/26/2025		13	1	1	0	0	15	0	0	0	0	0	15
08/27/2025		13	1	1	0	0	15	0	0	0	0	٥	15
08/28/2025		13	1	1	0	0	15	0	0	0	0	o	15
08/29/2025		14	1	1	0	0	16	0	0	0	0	0	16
08/30/2025		14	1	1	0	0	16	0	0	0	0	o l	16
08/31/2025		14	1	1	0	o	16	0	0	0	0	0	16
	Total:	410	31	17	0	0	458	0	0	0	0	0	458

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Start Date: 09/01/2025 End Date: 09/30/2025

Summary By Day													
		ouse Days	Loavo	Therapeutic Leave Days	Pre-Admit	DC/ Expired Days	Billable	Inhouse Non-Billable Days	Hospital Non-Billable Leave Days	Therapeutic Non-Billable Leave Days	DC/Expired Non-Billable Days	:Non-Billable	Total Census Days
09/01/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/02/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/03/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/04/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/05/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/06/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/07/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/08/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/09/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/10/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/11/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/12/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/13/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/14/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/15/2025		14	1	1	0	0	16	0	0	0	0	0	16
09/16/2025		15	0	1	0	0	16	0	0	0	0	0	16
09/17/2025		15	0	1	0	0	16	0	0	0	0	o	16
09/18/2025		15	0	1	0	0	16	0	0	0	0	0	16
09/19/2025		15	0	1	0	0	16	0	0	0	0	0	16
09/20/2025		14	0	2	0	0	16	0	0	0	0	0	16
09/21/2025		14	0	2	0	0	16	0	0	0	0	0	16
09/22/2025		14	0	2	0	0	16	0	0	0	0	0	16
09/23/2025		15	0	1	0	0	16	0	0	0	0	0	16
09/24/2025		15	0	1	0	0	16	0	0	0	0	0	16
09/25/2025		15	0	1	0	0	16	0	0	0	0	o	16
09/26/2025	-	16	0	0	0	o	16	0	0	0	0	0	16
09/27/2025		16	0	0	0	o	16	0	0	0	0	0	16
09/28/2025		16	0	0	0	o	16	0	0	0	0	0	16
09/29/2025		16	0	0	0	o	16	0	0	0	0	0	16
09/30/2025		16	0	0	0	o	16	0	0	0	0	0	16
	Total:	437	15	28	0	. 0	480	0	0	0	0	0	480

Jan to December 20	025 Cash Flow Cash Receipts	Expenses Cash Explanation							
Jan	\$ 804,346		Rev Per	r Matrix Inc Stmt	Rev Per Tyler Inc Stmt	Var Matrix to Tyler	Oney nor Matrix In St.	PETER THE PETER LINE AND PARTY.	
Feb	\$ 884,432	payrons, sick payout, Almuai Crime insurance Premiu	m é	935,314.00	The state of the s		A STATE OF THE PARTY OF THE PAR		ar Matrix to Tyler
Mar		\$ 806,042 \$78,390 Dec MA pmt rec'd/reflected in Feb, Jan MA pmt not rec'd in Feb a	s short month	875,109.00			\$ 905,545.00	1,0,0,111.22	\$ (167,666.22)
	\$ 930,466	\$ 2,089,256 -\$1,158,790 2025 Workers Comp Premium Adjustment, Debt Service Pmts/Intr	erest Pmts c	965,618.00		(-)	\$ 767,395.00	\$ 823,175.62 \$	\$ (55,780.62)
Apr	\$ 941,640	\$ 809,995 \$131,645	,				\$ 1,084,622.00	\$ 808,586.11 \$	\$ 276,035.89
May	\$ 871,312	\$ 853,248 \$18,064 Easter Holiday, 2nd Install-Liability Ins	\$	915,579.00		(,)	\$ 838,429.00	\$ 820,677.82 \$	5 17,751.18
June	\$ 976,419	\$ 792,667 \$183,752 Memorial Day Holiday	\$	951,034.00		\$ 79,721.78	\$ 895,856.00	\$ 815,969.68 \$	
Jul	\$ 1,081,732	\$ 792,198 \$289,535 4th of July Holiday, Auto Liability Insurance	\$	928,307.00	\$ 976,419.00	\$ (48,112.00)	\$ 804,053.00		,
Aug	\$ 1,258,721	The state of the s	\$	936,598.00	\$ 1,081,732.30	\$ (145,134.30)	\$ 862,567.00		45,551.50
Sept	\$ 1,020,740	\$ 1,397,979 -\$139,258 3 payrolls - there looks to be an error in Matrix related to payroll v \$181,584	vill need to correct this and should pt \$	1,258,721.00	\$ 886,991.93	\$ 371,729.07	\$ (139,258.00)		
Oct		\$0	\$	1,020,740.00	\$ 1,268,479.52	\$ (247,739.52)	\$ 181,584.00	-1-1-1-1-1-1-1	
Nov Dec		\$0 \$0				, , , , , , , , , , , , , , , , , , , ,	101,304.00	\$ 639,418.91	(657,834.91)
	\$ 8,769,808	\$ 9,421,274 \$ (651,466)	\$	8,787,020.00	\$ 8,645,818.21	\$ 141,201.79	\$ 6,200,793.00	\$ 7,873,525.00 \$	(1,672,732.00)
Jan to December 202	24 Cash Flow								
	Cash Receipts	Expenses Cash Explanation							
Jan	\$ 791,886								
Feb	\$ 834,867	\$ 884,415 -\$92,530 2 holidays; sick p/o; \$58,685 prop&liab ins; \$600,000 tx:debt service \$ 757,818 \$77,049	to Gnri Fnd						
Mar	\$ 664,728								
Apr	\$ 867,845	\$162,174	.96 Medicare pymt not rec'd until April d/t Go	ood Friday					
May		\$ 842,981 \$24,864 March Medicare pymt rec'd; Easter Holiday							
lune	\$ 773,868	\$ 857,560 -\$83,692							

June

Aug

Sept

Oct

Nov

Variance

\$ 927,861

\$ 787,784

\$ 733,676

\$ 852,573

\$ 823,046

\$ 1,052,233 \$ 9,967,295

\$ (59,719)

856,929

\$

\$

\$

\$

\$

888,300

781,201

997,119

771,560

773,699

\$ 10,226,113 \$ (258,818)

\$ 778,544

\$ 897,136

\$ 11,014,050

\$ (787,938)

\$

Per Dec 31, 2024 Inc Stmt \$ 10,027,015

-\$37,885

\$78,874

\$146,660 July 4th Holiday;

\$44,502 Thanksgiving Holiday

-\$31,372 Memorial Holiday; SP recoupment\$ 84,517; Lawn Mower \$9,700

\$155,097 Comp Payout, Cash includes Solar Tax Credit, WC 2025 Ins paid

-\$209,335 3 payrolls; \$725,000 moved from cash acct to Debt Service Fund for use in 2025

need to check these totals against the audited financial statements

Pine Valley Community Village Announces Water Supply Restored and Safe for Use

### 10/06/2025

Pine Valley Community Village is pleased to announce that our water supply has been tested and confirmed safe for all uses following recent concerns regarding the presence of bacteria in the system. The most recent water testing, completed in collaboration with local public health authorities and the Wisconsin Department of Natural Resources, shows no detectable bacteria, and the water is fully compliant with all state and federal safety standards.

Effective immediately, residents, staff, and visitors may safely use the facility's water for drinking, cooking, and hygiene.

During the precautionary period, Pine Valley took immediate action to ensure the safety and comfort of all residents, including:

- · Providing bottled water for drinking and hygiene needs
- · Coordinating with environmental health and public utility experts
- Conducting system flushing and disinfection in accordance with state guidelines
- Completing multiple rounds of laboratory testing to confirm water safety

We are grateful for the patience and understanding of our residents, families, and staff during this time. The health and safety of our residents are always our top priority, and we are happy to report that our water system has been fully cleared for normal use.

Pine Valley Community Village will continue to monitor the water supply as part of its ongoing commitment to safety and regulatory compliance.

**Brittany Paulus Administrator** 

09/24/2025 at 03:47pm while Chad was out for the day, the email came in for our water sample results- this was not seen until 09/25/2025. Water showed contaminate of coliform but E.coli negative.

09/25/2025 at 7:00am Chad completed the new water samples requested by DNR. Took those immediately to the State of Wisconsin Lab of Hygiene, he was notified that he would received the results by noon 09/26/2025. At 11:47am Administrator was notified of this by Chad. Administrator called and emergency meeting with management and nursing staff. It was decided by administrator we would stop use of all water in house and utilize our emergency water providers to obtain clean safe water until additional samples results were received. Administrator sent Ryan Elliot SW to Walmart to get water immediately while Jesi Towne called our suppliers to obtain additional water. Ryan obtain several packages of water bottles and gallons of water, Jesi had order a rack of 5 gallon jugs from Culligan- 35: 5 gallon jugs were delivered the same day. Staff were instructed not give showers, or allow residents to brush teeth or drink from their rooms until further notice and to use the water that was purchased and provided. Dietary staff was instructed to not use any water in the kitchen when preparing meals and to utilized the bottle water instead. We unplugged the ice machines, emptied out all juices that were made with the contaminated waters. We took all the water jugs out of the room for them to be sanitized in the high heat dish washers. Staff were instructed to use hygiene wipes for residents for personal cares as well as they have access to utilizing the safe water. At 2pm, Administrator, Ryan and Mark Menne RN supervisor went to each wing to talk with all the cognitively intact residents in regards to the situation. Ryan and Natalie CBRF supervisor reached out to all activated HCPA, and sent the notice in the mail to them. Clayton Ward went to well house and shocked the well with 1 gallon of chlorine. Let it sit for 6 hours and flushed following viahopper sinks, faucets in non-residential locations were ran for about 10 minutes, flushed all the toilets.

09/26/2025- Lab results received via phone call to Chad stating there was trace E.coli that came from the sample from community room that was dropped off 09/25/2025. The sample collected from the main distribution room came back positive for total coliform but negative for E.coli. Well house came back negative for all. DNR reached out with a Boiling water notice, which public statement and notice posted in the building and sent to the radio and newspapers. Joe Mather maintenance assistant completed flushing of all residential and non residential sinks 10 minutes of cold and 10 mins of hot per DHS recommendation. Flushed all toilets. Additional water was received Kraemer farms per our emergency water supply, in Culligan containers directly from their well. Martin brothers called and order 30 gallons of water from them scheduled to be delivered on 09/27/2025 at 8am. Culligan was also contact for another rack to be delivered on 09/29/2025. Staff

member Cassandra Anderson reached out to her father and got a clean water tank that held 250 gallons, they filled up with their safe water, this was placed in front of the building on the back of the truck. This water was to be used for cleaning, washing of the hands, and residents bathing water.

09/29/2025 – Chad Maintenance Director collected another sample of water to the Wisconsin state lab of hygiene. Purchased two 250 gallon water storage tanks. County Highway department came and picked them up on a trailer, took them to Schrieber's food to have them filled and placed them at the each side of the facility for easy access use for the staff. Additional chlorine was put into the well. Culligan delivered another rack of water to the building.

09/30/2025- Results from labs was received stating the E.coli was in the reservoir and the fire hydrant. Coliform only in the other 3 locations. Administrator had a meeting with residents and staff could join to go over the results and give an update to ensure that they were aware of the situation and the importance of utilizing bottle water.

10/01/2025- Maintenance director collected additional samples, took them to Lancaster, when returned maintenance and assistant completed an entire facility flush which included, all faucets for 25 minutes, flushed all toilets 3 times, Fire hydrant across the road.

10/02/2025- Maintenance collected additional samples to take to lab as the results of the previous days results were clear from all bacteria.

10/03/2025- 09:30am Clayton Ward poured about 8 gallons of bleach into the reservoir to let sit for a while. Russell Fiene from Water Tower Clean & Coat, Inc. came to Pine Valley at 10am, he and maintenance assistant Clayton Ward walked to try to find the source of contaminates. Were unable to locate and flushed all fire hydrants and turned on all the faucets in the facility. Russ collected samples at 2:30pm and took to Lodi.

10/04/2025- Russ called stating that samples came back negative for all bacteria, suggested to run a chlorine residual before turning back on line. Maintenance director received a call from Lauren Belz DNR rep stating that we again had negative samples.

10/06/2025- received the email stating that we were no longer on bottle water notice, Chad took residual sample and chlorine level was at 1.4, we resumed using water as normal.

## **Boil/Bottle Water Advisory**

#### PINE VALLEY COMMUNITY VILLAGE water is contaminated with E. coli

**E. coli** bacteria were found in our water supply. These bacteria can make you sick and are a concern for people with weakened immune systems.

We routinely monitor for the presence of drinking water contaminants. The presence of coliform bacteria including E.coli bacteria in your drinking water is a violation of State and Federal Safe Drinking Water Regulations. A water sample collected on 09/22/2025 indicated the presence of total coliform bacteria. Further sampling on 09/25/2025 confirmed the presence of total coliform bacteria and E. coli bacteria.

#### What precautions should be taken at this time?

Discontinue use of this water for human consumption. Human consumption means drinking, cooking, food preparation and making ice, dishwashing, and all personal hygiene needs (e.g., showering, hand washing, bathing and oral hygiene). Ice, food, and any beverages prepared with unsafe water must be discarded. You should boil or use commercially bottled water for drinking, food preparation, and making ice. If you boil water, the water should be heated to a rolling boil for at least **ONE** minute before use.

#### What does this mean?

E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Human pathogens in these wastes can cause short-term effects, such as diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a greater health risk for infants, young children, some of the elderly, and people with severely compromised immune systems.

The symptoms above are not caused only by organisms in drinking water. If you experience any of these symptoms and they persist, you may want to seek medical advice. People at increased risk should seek advice about drinking this water from their health care providers.

You should use boiled or bottled water until we in present. We are working to resolve this problem			o bacteria are
If you have questions regarding the saf	ety of our drin - אור/	king water, please	contact:
Name of Responsible Person	Area Code-Tel	ephone Number	<u> </u>
Street Address	City lance	State	
Locatify that the information and distance arts contains	ad in this public noti	an are true and correct ar	ad have been
I certify that the information and statements containe provided to consumers in accordance with the delive	•		
VII of ch. NR 809, Wis. Adm. Code.		9/24/25	

<sup>\*\*</sup> Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this notice in a public place or distributing copies by hand or mail.

### Pine Valley Community Village Water Supply

Date: 09/26/2025

We are writing to inform residents, families, staff, and community partners that routine water testing at **Pine Valley Community Village** has detected the presence of *E. coli* bacteria in our water supply.

Please know that the health and safety of our residents and staff are our top priority. As soon as the test results were received, we took immediate precautionary measures, including:

- Notifying the local health department, the Wisconsin Department of Health Services, and the Department of Natural Resources
- Implementing water safety protocols, including the use of bottled water for drinking and food preparation, bathing and other needs at this time. We have contracts with safe water and will continue to supply to ensure the safety of your family.
- **Providing clear guidance** to staff and residents to ensure compliance with safety measures.
- Arranging for remediation and follow-up testing in accordance with regulatory guidelines.
- Hands out have been given to each resident and POA's have been notified as well.

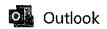
At this time, no illnesses related to this finding have been reported at our facility. We will continue to monitor all residents closely and keep families updated.

We are working closely with local and state health authorities to ensure the safety of our water supply and will provide further updates as soon as test results confirm the water is safe for normal use.

The DNR will be out within 30 days to complete a level 2 assessment to locate any further issues within our water system and help create a plan that ensure the quality of water is restored and maintained.

If you have questions or concerns, please contact Brittany Paulus LNHA (608) 647-2138

Thank you for your understanding and support as we take every step to protect those entrusted to our care.



### **Pine Valley Water Supply**

From Brittany Paulus <bri> srittany.paulus@co.richland.wi.us>

Date Fri 9/26/2025 3:59 PM

To Epitaph Newspaper <epitaphnewspaper@gmail.com>; WRCO News <wrconews@civicmedia.us>; Valley Sentinel News <editor@valleysentinelnews.com>; Richland Observer <editor@richlandobserver.net>

Cc Tricia Clements <tricia.clements@co.richland.wi.us>

1 attachment (80 KB)

Public Notice.pdf;

Good Afternoon,

Please see attached for public notice of the current situation with out water. Please let me know if you have any questions in regards to this.

Have a wonderful day,

**Brittany Paulus** 

Licensed Nursing Home Administrator

Pine Valley Community Village

25951 Circle View Ln

Richland Center, WI 53581

(608) 647-2138

#### 400 Hall

Upon learning of well water sample results, discussion was had with the residents that were present in their rooms, about the initial well water results and the procedure taking place to re-test and put in place precautions related to findings. Paperwork with the organism found and possible effects it could have, were discussed and explained to the residents. Resident allowed to keep information paperwork and told to ask at any time for any questions. Residents informed of short-term nonuse of water in the facility and in their private bathrooms with signage being placed to water sources as a reminder to not use the water at this time and that water was being brought into the facility to meet their needs. Staff education provided one on one and explained the results of the sample test and the possible side effects from the organism. Staff hygiene protocol explained to staff and residents for washing of face, hair, body and hand hygiene. Staff encouraged to monitor their own person and residents for changes such as GI symptoms or other changes with symptoms evaluation sheets being created and to be completed by staff with every shift.

09-26-25

#### 400 Hall

Second sample return showing positive for two organisms. Additional signage being placed to resident bathroom showers and education provided for current reason for non-use until water sample tests return negative. Staff updated to not use internal water sources for any bodily contact with any of the residents. Hand hygiene protocol updated with use of hand sanitizer and cleansing wipes to maintain sanitary conditions for themselves and the residents. Hand sanitizing products and additional supplemental water being placed on all wings of the facility. Residents voiced understanding and encouraged to ask if they have any questions and update staff for feeling like they have any change in condition and also informed that staff will be monitoring symptoms minimal three times daily with additional monitoring as needed. Signage placed and informative materials given to residents to read or have explained as needed.

MAN IN

DON contacted the local Culligan provider to obtain a rack which consisted of 36 5 gallon jugs of water for drinking ADLs and cooking purposes at 12:30 PM on September 25

Peri Toume RN-DON

At 12:40 DON on September 25 contacted Brandi Anderson, the public health nurse to report the bacteria in the water supply. She was going to reach out to her contacts and provide us with any information that she felt we needed to do with the bacteria as well as contact information.

Peri Toure Dr. Dow

At 1:05 on September 25 DON sent an email to Melissa at the Richland hospital to share with all of the doctors in regards to bacteria in the water.

New Towner - Don

Education provided to all staff at general staff meeting at both 1 o'clock and 2:30 on September 29 in regards to bacteria and water and the plan moving forward with drinking water and cooking water

Pentoura Dou

On September 25 at 2 PM DON went around to all of the hallways and updated all Cna and nursing staff working about utilizing bottled water and Culligan water for any consumption and not utilizing the shower to decrease the risk of consumption of water and ADLs

Sen Towner Dan

On September 25 at 12:50 DON contacted unit clerks and assisted in creating a monitoring form to be completed on every shift on every hallway monitoring for the symptoms of nausea, vomiting, and diarrhea

Periture misson

On September 26 at 6:00 PM DON contacted foremost USA about obtaining water on Saturday morning to ensure water supply for consumption foremost bringing water in the morning of Saturday, September 27 unit nurses made aware of where to put the water when it arrives

Peri town pur Dow

On September 26 at 3 PM DON went to Walmart and purchased body wipes for both regular and sensitive skin and provided them to all units for ADL use and also educated the staff on the use of incontinent product wipes for incontinence and not utilizing any tap water for any type of bathing or consumption

Neis romemoson

On September 26, DON posted memos on all caregiver rooms on the skilled side and distributed to each nursing med cart as well as the staff education board in regards to directions on ADLs with Culligan provided water and consumption of Culligan water

DON also spoke to ALL

Norsing and CNA Stass

On the hallwars providing function

This information and

Ensuring they Read Memo

On September 26, DON was approached by unit nurse who offered to provide a large 400-500 gallon container to Pine Valley from her family farm for ADLS and cleaning.

den Touve 20-Don

Ice was obtained from Kwik trip and placed in chest freezers on each household for use.

Len Toure Zu. Don

This writer talked/educated the following legal representatives, guardians and residents on 9/25/2025 and 9/26/2025 regarding the presence of Coliform Bacteria and E coli bacteria in Pine Valley's water source. The individuals were verbally educated on the actions taken (i.e. additional testing, use of only bottled water or water from safe source, the need to immediately stop using Pine Valley's water for drinking, cooking and washing/bathing, self-report to State, DNR, Public Health and other entities), in addition to providing with a fact sheet on Bacteria in Private well Water.

MM, sw

9/25/2026

This writer talked/educated the following legal representatives and guardians on 9/25/2025 and 9/26/2025 regarding the presence of Coliform Bacteria and E coli bacteria in Pine Valley's water. The individuals were verbally educated on the actions taken (i.e. additional testing, use of only bottled water or water from safe source, the need to immediately stop using Pine Valley's water for drinking, cooking and washing hands/face, self-report to State and other entities), in addition to providing with a fact sheet on Bacteria in Private well Water.

MM/ 9/26/2025

STATE OF WISCONSIN **DEPARTMENT OF NATURAL RESOURCES** PLYMOUTH SERVICE CENTER 1155 PILGRIM RD PLYMOUTH WI 53073

Karen Hyun, Ph.D., Secretary Telephone 608-266-2621 Toll Free 1-888-936-7463 TTY Access via relay - 711



September 26, 2025

PWS ID: 15300648 PWS Type: MC - Richland County DNR Violation: 118896342

ANGELA WALL PINE VALLEY COMMUNITY VILLAGE 25951 CIRCLE VIEW DR **RICHLAND CENTER WI 53581** 

> SUBJECT: Notice of Noncompliance - Violation of E. coli Maximum Contaminant Level at PINE VALLEY COMMUNITY VILLAGE

#### Dear Angela Wall:

Department records indicate that repeat sampling conducted on 09/25/2025 confirms E. coli are present in your drinking water system. This is a violation of the maximum contaminant level (MCL) for E. coli (s. NR 809.30, Wis. Adm. Code) and is a serious matter which requires your immediate attention. E. coli are bacteria whose presence indicates that the drinking water may be contaminated with human or animal wastes.

Water supplied by your system should not be used for human consumption. Human consumption means drinking, cooking, food preparation and making ice, dishwashing, and all personal hygiene needs (e.g., showering, hand washing, bathing and oral hygiene).

#### Take the following actions immediately:

Contact with your DNR Representative. If you have not already been contacted by a DNR representative, please contact Amy Kubly at (608)219-3068 to discuss the specific situation, relevant details and the required follow-up assessment of your water system.

<u>Begin public notification</u>. Provide a public notice (PN) as soon as possible but no later than 24 hours after being notified of the E. coli MCL violation, as outlined in s. NR 809.951, Wis. Adm. Code. Give public notice for as long as the violation or situation persists.

Use one or more means (radio, television, posting at conspicuous locations or hand delivery) to ensure all persons served by your system are notified.

If more than 5% of the population served by your system consists of non-English speaking consumers, the public notice must contain information in the appropriate language(s) regarding the importance of the notice and where to obtain more information in another language.

If you use the attached public notice, fill in all the blanks and sign and date the certification at the bottom. The notice can be supplemented with additional relevant information, but do not delete any of the existing text (it is required by law). If you use a different public notice, it must include the information required in s. NR 809.954, Wis, Adm. Code, as well as a signed and dated certification similar to the one on the sample public notice.

Return a copy of your completed public notice and certification to our office within 10 days of giving public notice.



<u>Follow-up Assessment</u>. After public notification, contact your DNR Representative to assist you and <u>schedule/conduct</u> an assessment (Level 2 Assessment) within 30 days. The purpose of this assessment is to find any sanitary defects that may be causing contamination of the water system and schedule corrective action(s) to fix them.

Failure to give public notice and complete the required Level 2 Assessment will result in additional violations and enforcement action. If you need technical assistance, contact Lauren Belz at (608)800-2915 or lauren belz@wisconsin.gov or Amy Kubly at (608)219-3068 or amy kubly@wisconsin.gov.

Sincerely,

alysse Rosewood

Alyssa Rosewood Compliance Specialist Drinking Water and Groundwater Program

cc:

Chad Williamson - Sampler and Certified Operator (via email)

Lauren Belz (DNR Rep) - Fitchburg Service Center (via email) Amy Kubly (DNR Rep) - Fitchburg Service Center (via email)

Eileen Pierce (DNR SCR District Supervisor) - Fitchburg Service Center (via email)

Encl:

**Public Notice** 

#### **Wisconsin Department of Natural Resources Laboratory Report** Report 1 of 1

Laboratory: Wisconsin State Laboratory of Hygiene Lab ID: 113133790

Lab Phone: 800-442-4618

PWS ID #: 15300648

Sample #: 813779001

PWS Name: PINE VALLEY COMMUNITY VILLAGE

Sample Date: 9/22/2025

Time: 11:25 AM

PWS Type: MC

Date Received: 9/23/2025

Sample Source: D Distribution System

Sample Type: **D** 

Date Reported: 9/24/2025

EPA Source ID:

Collected by: C WILLIAMSON

DNR Rep: BELZ, LAUREN

County: Richland

Sample Address: MULTI PURPOSE RM

Location Description: KITCHEN SINK

Analysis Method SM9223B	Analysis Date 9/24/2025	Lab Comment			
Lab Memo:					
Code Description 99060 Coliform Total - Colilert Presence/Absence 99069 E Coli - Colilert Presence/Absence	MCL	Result Units PRESENT /100 ML ABSENT /100 ML	<i>Qualifier</i> Normal Normal	LOD	LOQ

Analysis Method Field Chiorine Data	Analysis Date	Lab Comment			
Lab Memo:					
Code Description 50064 CHLORINE FREE AVAIL FIELD	MCI		<i>Qualifier</i> Field Result	LOD	LOQ

DNR Drinking Water Program South Central Region 3911 Fish Hatchery Rd Fitchburg WI 53711

### BACTERIOLOGICAL ANALYSIS

(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

Public Water Supply Form Number: 6804 Revision: 20240105 Generated: 9/26/2025

Section I: System Information (to be completed by Department of Natural Resources/SAMPLER)

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System Name: PINE VALLI	EY COMMUN	IITY VIL	LAGE	1			PW	/S ID:	1530	0648
DNR Contact: LAUREN BE										
System Address: 25951 CIRC	CLE VIEW D	R		City	: RICH	LAND CENT	ER Cour	ity: Ricl	hland	
Entry Point ID: WI	Unique Well N	io:		Note:	Systen	n Chlorinates.				e to
Sampler Contact Info: (Notif						(Leave Blank If	You Don't Use			
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50064 CHLORINE FREE	AVAIL FIELD			J					4.0	MG/L
50066 COMBINED AVAIL	ABLE CHLORI	NE				mino philippo o 1994 are sino Malacoma y republica w seem automates are			4.0	MG/L
Section IV: Lab Test Results (	to be complete	d by LAB	) Lab h	as 24	hours t	o electronically	report results	to DNR	per NI	809.80
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Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis. Stats, and ch. NR 809.80. Personally identifiable information on this form will be used for no other purpose. Reference Requirement #22966613.

#### INSTRUCTIONS FOR BACTERIOLOGICAL SAMPLING

#### **Notes on the Sample Type**

Routine Distribution Sample

1. Collect samples from sites listed in the approved Sampling Site Plan (contact your nearest DNR office if you do not have a site plan).

#### Additional Routine Sample

- 1. Collect samples from sites listed in the approved Sampling Site Plan (contact your nearest DNR office if you do not have a
- 2. Collect Additional Routine samples throughout the calendar month following the positive sample collection date, or the date the water is once again served to the public, whichever is later (contact your nearest DNR office for further guidance).

#### Check Sample

- 1. Collect sample at the <u>same location</u> as the initial positive sample.
- 2. Collect within 24 hours of notification of the initial positive sample.

#### Repeat Sample

- 1. Collect samples within 5 service connections upstream and downstream of the initial positive sample, unless there is only one service connection (contact your nearest DNR office for further guidance).
- 2. Collect samples within 24 hours of notification of the initial positive sample.
- 3. All samples must be collected on the same day unless you have only 1 service connection. Systems with only 1 service connection may alternatively collect the samples (including the Check Sample) over a 3-day period.

New Construction, Raw Water, or Investigation Sample

1. Collect samples as needed or according to DNR staff directive.

#### SAMPLING INSTRUCTIONS

- 1. Check with your local post office or commercial carrier to determine what time they will send samples to your laboratory and collect the sample just prior to sending to the laboratory. Samples must be analyzed within 30 hours of collection, so send the sample for guaranteed delivery within 24 hours of sample collection to the laboratory. Plan to send the sample early in the week and avoid Fridays, Saturdays, State and Federal Holidays.
- Avoid plastic, swing, goose-neck, leaky, chrome and outside faucets.
- 3. Remove any faucet aerator, gasket, screen or hose.

- 4. Sterilize the faucet using a propane or butane torch. Hold the flame beneath the faucet opening for 20 seconds. Move the flame continuously to prevent damage to the faucet. Plastic or chrome faucets will melt when heated.
- 5. Run the cold-water at medium force for at least 5 minutes before collecting samples. Do not change the flow rate or wash or wipe the tap before collecting the sample.
- 6. Remove the security seal, and then remove the sample bottle cap without touching the inside of the cap or bottle. Hold onto the cap while sampling.
- 7. Fill bottle to within one inch of the top or to the fill line. Replace cap securely. Write name on the side of the bottle.
- 8. Send the water sample and this completed form to a laboratory that is certified under the Safe Drinking Water Act for the testing of total coliform and E. Coli bacteria by an enzyme substrate method, and who reports the results electronically to the DNR.

#### For Additional Information, Contact Your Nearest DNR Office

Southeast Region, Milwaukee: Northeast Region, Green Bay: South Central Region, Fitchburg:	(414) 263-8362 (920) 662-5144 (608) 275-3294	West Central Region, Eau Claire: Northern Region, Spooner:	(715) 839-370 (715) 635-210	
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# Wisconsin Department of Natural Resources

9/26/2025

Laboratory Report Report 1 of 3

Laboratory: Wisconsin State Laboratory of Hygiene

Lab ID: 113133790

Lab Phone: 800-442-4618

PWS ID #: 15300648

Sample #: **814255001** 

Time: 06:55 AM

PWS Name: PINE VALLEY COMMUNITY VILLAGE PWS Type: MC

Sample Date: 9/25/2025
Date Received: 9/25/2025

Sample Source: W Well

Date Received: 9/25/2025

Sample Type: T

Date Reported: 9/26/2025

EPA Source ID: 1

DNR Rep: BELZ, LAUREN

Collected by: C WILLIAMSON

County: Richland

Sample Address: WELL HOUSE
Location Description: SAMPLE FAUCET BEFORE CHLORINE

Analysis Method SM9223B	Analysis Date 9/26/2025	Lab Comment	<u> </u>			
Lab Memo:						
Code Description 99060 Coliform Total - Colilert Presence/Absence 99069 E Coli - Colilert Presence/Absence	MCL	Result ABSENT ABSENT		<i>Qualifier</i> Normal Normal	LOD	LOQ

### Wisconsin Department of Natural Resources **Laboratory Report**

9/26/2025

Report 2 of 3

Time: 06:45 AM

Laboratory: Wisconsin State Laboratory of Hygiene

Lab ID: 113133790

Lab Phone: 800-442-4618

PWS ID #: 15300648

Sample #: 814264001

PWS Name: PINE VALLEY COMMUNITY VILLAGE

Sample Date: 9/25/2025 Date Received: 9/25/2025

PWS Type: MC

Sample Source: D Distribution System

Date Reported: 9/26/2025

Sample Type: C EPA Source ID:

Collected by: C WILLIAMSON

DNR Rep: BELZ, LAUREN

County: Richland Sample Address: MECH RM

Location Description: SAMPLE FAUCET

Analysis Method SM9223B	Analysis Date 1 9/26/2025	Lab Comment	Y-U-F	, . <u></u>	
Lab Memo:	-				
Code Description 99060 Coliform Total - Colilert Presence/Absence 99069 E Coli - Colilert Presence/Absence	, MCL	Result Units PRESENT /100 ML ABSENT /100 ML	<i>Qualifier</i> Normal Normal	LOD	LOQ

Analysis Method	Analysis Date	Lab Comment			
Field Chlorine Data					
Lab Memo:					
Code Description 50064 CHLORINE FREE AVAIL FIELD	MCL	Result Units .59 MG/L	<i>Qualifier</i> Field Result	LOD	LOQ

# Wisconsin Department of Natural Resources Laboratory Report

9/26/2025

Report 3 of 3

Time: 12:05 PM

Laboratory: Wisconsin State Laboratory of Hygiene

Lab ID: 113133790

Lab Phone: 800-442-4618

PWS ID #: 15300648

Sample #: 814448001

PWS Name: PINE VALLEY COMMUNITY VILLAGE

Sample Date: 9/25/2025

PWS Type: MC

Date Received: 9/25/2025

Sample Source: D Distribution System

Date Reported: 9/26/2025

Sample Type: **D** EPA Source ID:

Collected by: C WILLIAMSON

DNR Rep: BELZ, LAUREN

County: Richland

Sample Address: MULTIPURPOSE RM Location Description: KITCHEN SINK

Code Description MCL Result Units Qualifier LOD	Analysis Method Field Chlorine Data	Analysis Date	Lab Comment			
FORCE CITE OF THE PROPERTY OF	Lab Memo:					
50004 CHECKINE FREE AVAIL FIELD .60 MG/L Field Result	Code Description 50064 CHLORINE FREE AVAIL FIELD	MCL	Result Units .60 MG/L	<i>Qualifier</i> Field Result	LOD	LOQ

Analysis Method SM9223B	Analysis Date 9/26/2025	Lab Comment			
Lab Memo:	***				
Code Description 99189 Coliform Total - Colilert-18 Presence/Abser 99191 Coliform Total - Colilert-18 Quantitray 98932 E Coli - Colilert 18 Presence/Absence 98930 E Coli - Colilert-18 Quantitray	<i>MCL</i>	Result Units PRESENT /100 ML 74 /100 ML PRESENT /100 ML 1 /100 ML	Qualifier Normal 1 Normal	LOD 1 1 1	LOQ 1

DNR Drinking Water Program South Central Region 3911 Fish Hatchery Rd Fitchburg WI 53711

# BACTERIOLOGICAL ANALYSIS (ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

Public Water Supply Form Number: 6804 Revision: 20240105 Generated: 9/24/2025

Section I: System Information (to be completed by Department of Natural Resources/SAMPLER)

Section 1: System Informati	OII (TO DE	compte	ted by i	sebut cm	CHU	oi Matura)	I Kesources/SA	MILLER	9			
System Name: PINE VAL	LEY CON	MMUN	IITY V	ILLAG	E				PW	'S ID:	1530	0648
DNR Contact: LAUREN F	ELZ (60	8)800-2	2915		a	Region:	1 Type: MC					
System Address: 25951 CI	RCLE VI	EW D	R		C		ILAND CENT					,, ,
Entry Point ID: W	I Unique	Well N	lo:		No							
Sampler Contact Info: (Notify DNR Contact of Corrections) (608)647-2138 WILLIAMSON, CHAD 25951 CIRCLE VIEW DR RICHLAND CENTER WI 53581				Sampler: Provide in change a l Fax Num Email:	(Leave Blank II formation to habilling address, inder: ddress:	You Donve results	faxed offers	or emaile these se	ed or to			
Sample Source: (Location)	Samp	le Type	e: (Che	k Only	One	e)			-tVerenza men		***********	***************************************
W - Well Source E - Entry Point X D - Distribution System	X C*  R*  A -  *IF T	- Chec - Repe - Addit HE SA	ck: Sam eat: Wit ional R MPLE	hin 5 co outine (r TYPE :	nnec nont	cts of Posi th followin 'C" or "R	"D" Sample tive "D" Samp ng positive "D"	le ") " or "A"	I - I W -	New Convestiga (Raw)	ition	ion
Engoial Instructions					Date	e: 9 / <u>ZZ</u>	/2025 Sa	mple ID	: 8137	79001	Miller v Neffeldinasna somme si d me	
Special Instructions: Collect Sample between:	V24/2025		O/OC/	1005		SAMPLES	MUST BE ANA	LYZED	WITH	IN 30 HC	URS O	F
Section II. Seconda Lafe		anu	9/43//	2023 2127	CC	OLLECTIO	ON. SEE SAMPI	LING IN	STRUC	TIONS	ON BA	CK.
Section II: Sample Informa		-					The second secon					
Sample Collection Date: Address where sample was				/uu/yyy	у)	ime:	- Charles of the Char	∪ a.m.	⊔p.m	•		
				tion (o.	v leid	tohon ainle	·	#1,4, N4-man is df Gidenson a sa	manuscript (4	-07	ander are many enderlying a fee	Philosophy and a decommon a security of
Monitoring Site ID: First Initial and Last Name	of Sample	mpie r	ap Loca -	mon (e.ş	3. KT	ichen sink	J:Campl	ar Dhan		remark from an automorphism en	THE PARTY OF THE P	Marie across ar pressure,
Section III: System Test Res												
If your system use	s continue	ous chl	orinatio	n, the cl	ılori	ne residua	al level at the t	on (to be	e comp sample	was co	SAMI llected	LER)
If your system use must be re	ported be arameter	low. Sy	stems'	who do 1	not c			nay skip				and the second section of the second
50060 CHLORINE TOT.		JAI. FIF			***********	SDWA	Method	-95.2401 40 (Start Militarian e	Kes	sults	MRDL 4.0	Units MG/L
50064 CHLORINE FREI					eric or allow collisions		НООН «1800» «Обліновання вого напача так парав. пр. п. ду	OF STREET, OF STREET,	**************************************	***************************************		MG/L
50066 COMBINED AVA	ILABLE C	HLORI	NE	*****	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Piller Ad Million and Blinder demonstrate an enterna	The second second and the second seco		PIGO (\$4 1446 44 - 10.46).1444			MG/L
Section IV: Lab Test Results	(to be co	mplete	d by LA	B) Lab	has 2	24 hours to	o electronically	report	results	to DNR		TOTAL CONTRACT PORT A SERVICE AND A SERVICE
	COLIFOR		W					EC				
Storet Description		SDWA Method	Result	Units		Storet	Deco	ription		SDWA Method	Dogult	Units
99060 Colilert® Presence/Ab			1000011	/100 ML			Colilert® Preser		10e	Memon	Kesuit	/100 ML
99190 Colisure® Presence/Al			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/100 ML			Colisure® Prese		-		P-00-10-10-10-10-10-10-10-10-10-10-10-10-	/100 ML
99192 Colisure® Quantitray				/100 ML		in v-minddifferences amount	Colisure® Quan	····				/100 ML
99189 Colilert®-18 Presence	Absence		with and	/100 ML		The same of the sa	Colilert®-18 Pre	co	sence			/100 ML
99742 MI Agar		· = 101 · · · · · · · · · · · · · · · · · ·		/100 ML		99743	MI Agar					/100 ML
99118 Colilert® Quantitray		······································		/100 ML		99188	Colilert® Quant	itray				/100 ML
99191 Colilert®-18 Quantitra	<u>y</u>			/100 ML			Colilert®-18 Qu	antitray			TOO PARTIE AND ADDRESS AND	/100 ML
99829 Colitag <sup>TM</sup>				/100 ML		and a second second	ColitagTM	·····is direk afterdada - nasrasas s				/100 ML
99961 Readycult®		- the Consultation	h.m	/100 ML	1		Readycult®	armen area opposite and	v #*4 110*********************		-1	/100 ML
99740 E*Colite®		MATERIA PROPERTY.		/100 ML	]	99741	E*Colite®			<u> </u>		/100 ML

Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis. Stats. and ch. NR 809.80. Personally identifiable information on this form will be used for no other purpose. Reference Requirement #5261264.

# INSTRUCTIONS FOR BACTERIOLOGICAL SAMPLING

## Notes on the Sample Type

Routine Distribution Sample

1. Collect samples from sites listed in the approved Sampling Site Plan (contact your nearest DNR office if you do not have a site plan).

### Additional Routine Sample

- 1. Collect samples from sites listed in the approved Sampling Site Plan (contact your nearest DNR office if you do not have a site plan).
- 2. Collect Additional Routine samples throughout the calendar month following the positive sample collection date, or the date the water is once again served to the public, whichever is later (contact your nearest DNR office for further guidance).

### Check Sample

- 1. Collect sample at the same location as the initial positive sample.
- 2. Collect within 24 hours of notification of the initial positive sample.

#### Repeat Sample

- 1. Collect samples within 5 service connections upstream and downstream of the initial positive sample, unless there is only one service connection (contact your nearest DNR office for further guidance).
- 2. Collect samples within 24 hours of notification of the initial positive sample.
- 3. All samples must be collected on the same day unless you have only 1 service connection. Systems with only 1 service connection may alternatively collect the samples (including the Check Sample) over a 3-day period.

New Construction, Raw Water, or Investigation Sample

1. Collect samples as needed or according to DNR staff directive.

### SAMPLING INSTRUCTIONS

- Check with your local post office or commercial carrier to determine what time they will send samples to your laboratory
  and collect the sample just prior to sending to the laboratory. Samples must be analyzed within 30 hours of collection,
  so send the sample for guaranteed delivery within 24 hours of sample collection to the laboratory. Plan to send the
  sample early in the week and avoid Fridays, Saturdays, State and Federal Holidays.
- Avoid plastic, swing, goose-neck, leaky, chrome and outside faucets.
- 3. Remove any faucet aerator, gasket, screen or hose.

Southeast Region, Milwaukee:

- 4. Sterilize the faucet using a propane or butane torch. Hold the flame beneath the faucet opening for 20 seconds. Move the flame continuously to prevent damage to the faucet. Plastic or chrome faucets will melt when heated.
- 5. Run the cold water at medium force for at least 5 minutes before collecting samples. Do not change the flow rate or wash or wipe the tap before collecting the sample.
- 6. Remove the security seal, and then remove the sample bottle cap without touching the inside of the cap or bottle. Hold onto the cap while sampling.
- 7. Fill bottle to within one inch of the top or to the fill line. Replace cap securely. Write name on the side of the bottle.
- 8. Send the water sample and this completed form to a laboratory that is certified under the Safe Drinking Water Act for the testing of total coliform and *E. Coli* bacteria by an enzyme substrate method, and who reports the results electronically to the DNR.

## For Additional Information, Contact Your Nearest DNR Office

West Central Region, Eau Claire:

(715) 839-3700

(414) 263-8362

Northeast Region, Green Bay: South Central Region, Fitchburg:	(920) 662-5144 (608) 275-3294	Northern Region, Spooner:	(715) 635-2101
Laboratory ID:	Laboratory Name:		······································
Date Received: / /	Time Received:	: Laboratory Sample ID:	ndefensers van noommenteels in it die mogen menteelskeer van de van de vanglijk versteelskeersteelskeersteelsk
Condition of Sample Upon Receipt	*		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
Signature of Receiving Lab Officia	T.	Date Reported to I	PWS: / /

DNR Drinking Water Program South Central Region 3911 Fish Hatchery Rd Fitchburg WI 53711

## BACTERIOLOGICAL ANALYSIS

## (ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

Public Water Supply Form Number: 6804 Revision: 20240105 Generated: 9/24/2025

Section I: System Information (to be completed by Department of Natural Resources/SAMPLER)

System Name: PINE VALLI	EY COMMUN	NTY V	LLAG	Е				PW	/S ID:	1530	00648	
DNR Contact: LAUREN BE	LZ (608)800-	2915			Region:	1 Type: N	ис					
System Address: 25951 CIRc	CLE VIEW D	R		Cit	y: <b>RIC</b> I	HLAND CI	ENTER	Cou	nty: <b>Ric</b> l		TIBEL LAN INE	
Entry Point ID: WI	Unique Well N	lo:		Note	e: Syste	m Chlorina	ites.				efo i rego prigoromo, a	
Sampler Contact Info: (Notify (608)647-2138 WILLIAMSON, CHAD 25951 CIRCLE VIEW DR				I C	Sampler: (Leave Blank If You Don't Use These Services) Provide information to have results faxed or emailed or to change a billing address, if your lab offers these services Fax Number:							
RICHLAND CENTER WI 535	881			1	Email: Billing Address:							
Sample Source: (Location)	Sample Type	e: (Chec	k Only	One)			419-2	reference property and a second	774-01-71		\	
W - Well Source E - Entry Point	D - Routi	ck: Same	e locatio			-	e	I - I	New Co nvestiga	ıtion	tion	
X D - Distribution System	*IF THE SA	ional Ro MPLE	outine (n <b>TYPE</b> l	nonth IS "C	followi " or "R	ing positive	"D") "D" or "A"	Positi		Water		
Special Instructions:	"D" or "A" P				9 / 22	/ ZUZ5	Sample ID	: 8137	79001		Andreas - Andreas	
Callest Samula Interest Av	14000 1	A (A # IA	^^=	S	MPLES	MUST RE	NATVZED	WITH	IN 30 HC	NIDS O	F	
Collect Sample between: 9/2	24/2025 and	9/25/2	025	COI	LLECTIO	ON. SEE SA	MPLING IN	STRUC	CTIONS	ON BA	ČK.	
Section II: Sample Information	n (to be compl	eted by	SAMPL	ER	ALLIT	TEMS REQ	UIRED)					
Sample Collection Date:		(mm/	dd/yyyy	y) I	ime:	The second secon	O a.m.	Op.m	•			
Address where sample was co	ollected:	-++>>-,				- The Market of the Control of the C	et 18 voltot i ver Communicação instrumento que se se se se	***************************************	and the state of t	Madhefeel widow courses	ranganopolytický fordalism rakat w	
Monitoring Site ID:	Sample Ta	ap Locat	tion (e.g	g. kite	hen sink	c):	richer annual sur many property (MARC) de-	rr imalhanası	**************************************	***************************************	-encondens-various accessor	
First Initial and Last Name of	Sampler:	************	Middle of the second section 1919 and 1	ueneralen lennus se		Sa	mpler Phon	e:	T P P P P P P P P P P P P P P P P P P P	TO THE REAL PROPERTY OF THE PERSON OF THE PE	tillion the law wassers and a second	
Section III: System Test Resul	t Information 1	for Syste	ms Wh	o Use	Continu	ious Chlorii	nation (to b	e comp	leted by	SAMI	LER)	
If your system uses on must be repo	continuous chi- orted below. Sy	ormatioi /stems v	n, the ch /ho do r	ilorin iot co	e residua ntinuou:	al level at tl sly chlorina	ne time the : ite may skin	sample this se	was co	llected		
Storet Par	ameter	- Marrier v. Citidam and real real			SDW	A Method			sults	MRDL	Units	
50060 CHLORINE TOTAL		ELD	- V - Do Ville of Linds and America		COMONA damenta antique	** York - Odic	Marine Marine and American	rec - ~			MG/L	
50064 CHLORINE FREE A 50066 COMBINED AVAIL	rivillier i recommende manual a reperir approprietable adultur			Whithirt messers	·· . remarkat	er val Deser in success a serve motor i hangeling må i fleskrer serve	andrews were a second to experience of figures were second		er eres ere <b>ss</b> intelligencember in		MG/L	
And the second s	managa yang persebikan distributan mengan,	~ = 20000 <del>11011011111</del> 1111111111111111111111			n		Marie Commence	nicke for strature action	~ *************************************		MG/L	
Section IV: Lab Test Results (		i by LA	B) Lab l	1as 24	hours t	to electronic			to DNR	per N	3 809.80	
Storet Description	OLIFORM SDWA Method	Result	Units		Storet	D	E C Description	OLI	SDWA Method	Result	Units	
99060 Colilert® Presence/Abser	1ce		100 ML		99069		esence/Abser	ice			/100 ML	
99190   Colisure® Presence/Abse	ence		100 ML		98931	Colisure® P	resence/Abso	nce	4		/100 ML	
99192 Colisure® Quantitray			100 ML		98929	Colisure® C	\uantitray				/100 ML	
99189 Colilert®-18 Presence/Al	osence		100 ML		98932	Colilert®-18	Presence/Al	sence		offinger or a new visits.	/100 ML	
99742 MI Agar	on many attended about 1 for the fact to account annual to the fact to the fac		100 ML		1	MI Agar	Constitution the appropriate representation to				/100 ML	
99118 Colilert® Quantitray			100 ML		1	Colilert® Q	AND AND ANDRES OF SERVICES AND				/100 ML	
99191 Colilert®-18 Quantitray			100 ML			Colilert®-18	Quantitray	htiodelikhi vilikun fileh sasseena			/100 ML	
99829 ColitagTM	***** \$   max		100 ML			Colitag <sup>TM</sup>				f-Bridge communities a	/100 ML	
99961 Readycult® 99740 E*Colite®			100 ML			Readycult®	manufacture - opiny that formation		***************************************	um.uso.gugdv	/100 ML	
Notice This fam.			100 ML		עץ /41	E*Colite®	ur ama mi- elle NG-titrides stradien sassanan			*	/100 ML	

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- 3. Remove any faucet aerator, gasket, screen or hose.

Southeast Region, Milwaukee:

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(715) 839-3700

(414) 263-8362

ar a mar Taria .	(920) 662-5144 (608) 275-3294	Northern Region, Spooner:	(715) 635-2101
Laboratory ID:	Laboratory Name:		
Date Received: / /	Time Received:	: Laboratory Sample ID:	- поттабления (на навтивности и не не в рустве навтиваем на проездост верхновает в навыбых (од соотделений вер
Condition of Sample Upon Receipt:_		The state of the s	- van var antersongsventer op i van verfallede i van entersone van de plus verprijven verprij dat hat velpe. Møde verprijven verprij
Signature of Receiving Lab Official:	er danner i mariada actu finale in de college e mariada de danne, constituto de la college e maria e danner i	Date Reported t	o PWS: / /

### DNR Drinking Water Program GWR SOURCE BACTERIOLOGICAL ANALYSIS South Central Region 3911 Fish Hatchery Rd (ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

**Public Water Supply** Form Number: 6804 Revision: 20240105 Generated: 9/24/2025

Section I: System Information (to be completed by Department of Natural Resources/SAMPLER)

Fitchburg WI 53711

		. (so se sompre	~~ ~ J = .	Larra corre	DATE OF	2 1 22 2 24 2 44 A	TANGO MI OCUI DI HITELI						
System	Name: PINE VALLE	Y COMMUN	ITY VII	LLAG	E			PW	S ID:	1530	0648		
	ontact: LAUREN BE												
System	Address: 25951 CIRC	CLE VIEW D	R		City		LAND CENTER						
	oint ID: 1 WI												
(608)64 WILLI	er Contact Info: (Notify 47-2138 AMSON, CHAD	DNR Contact	of Correct	ions)	Pi cl	Sampler: (Leave Blank If You Don't Use These Services) Provide information to have results faxed or emailed or to change a billing address, if your lab offers these services Fax Number:							
	CIRCLE VIEW DR AND CENTER WI 535	81			E	Email: Billing Address:							
Sample	e Source: (Location)	Sample Type	: (Check	Only	One)	**************************************							
X W - Well Source  E - Entry Point  X T* - Triggered Source Water sample to WI Unique Well No: BG751						_	-	_		nplianc	e sample		
B-	Entry Point	R - Repea	t Source	Water	sampl	le follow	ring E Coli-positiv	e Triggere	d Source	e Water	sample		
D ·	- Distribution System	WI Uni	que Well	No:	- M.S P. P. P 1, 12780.A.	which are more	EP/Source ID:						
		*IF THE SA						"A" Positi					
		"D" or "A" P	ositive S	ample I	Date: _	9 / 22	/ 2025 Sample	e ID: 8137	79001	m. willen Little Landbar m.			
Special	Instructions: Sample between: 9/2	e son me message i a sensimpermani is an estado casa casa	NOT STEEL AND ADDRESS OF THE PARTY OF THE PA	· nob -ar ranniba - Phr	··· r.s. warmenddianer			- handbiron - Harinda - Harinda Albertaille	K no controllà zoba una				
Collect	Sample between: 9/2	24/2025 and	9/25/20	25	SA COL	MPLES LECTIC	MUST BE ANALYZ N. SEE SAMPLING	ZED WITH GINSTRIIC	N 30 HC	OURS O	F CK.		
Section	II: Sample Informatio	n (to be compl	eted by S	AMPL	ER	ALL IT	EMS REQUIRED	)	110115	011 221			
Sample	Collection Date:	//	(mm/c	ld/yyyy	/) T	ime:	: 0	a.m. □p.m	,				
	s where sample was co						ON ON SELECT SERVICE OF SELECTION TO THIS ARE ASSOCIATED TO SELECTION OF SELECTION						
Monito	ring Site ID:	Sample T	ap Locat	ion (e.g	. kitel	hen sink							
	tial and Last Name of												
	III: System Test Resul												
	If your system uses of must be repo												
Storet		orted below. Sy ameter		Į.	iot co		lly chlorinate may Method			MRDL			
50060	CHLORINE TOTAL	CONTRACTOR OF THE PROPERTY OF THE PARTY OF T	ELD	-		D25 172	TO THE PROPERTY OF THE AND ASSESSED TO THE PROPERTY OF THE PRO				MG/L		
50064	CHLORINE FREE A	VAIL FIELD	- delicible activities be - recover access			ayaragan kana ana a <b>ya</b> n sana a sanagan y					MG/L		
50066	COMBINED AVAIL	ABLE CHLORI	NE				the name to the control of the contr		aktomina terhapatent penjahili	4.0	MG/L		
Section	IV: Lab Test Results (	to be complete	d by LAI	B) Lab l	nas 24	hours to	o electronically rep	ort results	to DNR	per N	R 809.80		
	TOTAL C	OLIFORM						E COLI					
Storet	Description	SDWA Method	Result	Units		Storet	Description	on	SDWA Method	Result	Units		
99060	Colilert® Presence/Abser	· · · · · · · · · · · · · · · · · · ·		100 ML			Colilert® Presence/			ENG - AL SOUTH - ESSAGE	/100 ML		
99190	Colisure® Presence/Abso	ence	* *** *** *** ***	100 ML			Colisure® Presence/	e			/100 ML		
99192	Colisure® Quantitray	N	1	100 ML		98929	Colisure® Quantitra	<u>y</u>	pro-ma more reference man. s.		/100 ML		
99189	Colilert®-18 Presence/Al	bsence	/	100 ML	ļ	98932	Colilert®-18 Presen	ce/Absence			/100 ML		
	MI Agar	a tank anno	<u> </u>	100 ML		99743	MI Agar	and the second s	New		/100 ML		
	Colilert® Quantitray		7	100 ML	ļ 1	-	Colilert® Quantitray				/1 <b>0</b> 0 ML		
	Colilert®-18 Quantitray			100 ML		Transportation de l'annual	Colilert®-18 Quanti	tray	manna	<u> </u>	/100 ML		
99740	E*Colite®		1 /	100 ML	Ì	99741	E*Colite®		1	i	/100 ML		

Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis, Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis. Stats. and ch. NR 809.80. Personally identifiable information on this form will be used for no other purpose. Reference Requirement #66160362.

# INSTRUCTIONS FOR GWR SOURCE BACTERIOLOGICAL SAMPLING

### Notes on the Sample Type

## Triggered Source Water sample following TC-positive TCR Compliance sample

- 1. Collect the sample from each source which provides the water to the site in the distribution system that had the TC-positive.
- 2. Collect the sample within 24 hours of notification of the TC-positive sample collected under the Total Coliform Rule (TCR), unless the DNR has given you a written extension. Samples must arrive at the lab and be set up for analysis within 30 hours of collection, so take mail delivery time into consideration and plan your collection time accordingly.
- 3. Collect the sample BEFORE treatment at a site listed in your approved Monitoring Plan.

## Repeat Source Water sample following E Coli-positive Triggered Source Water sample

- 1. Collect 5 samples at the same location as the Triggered Source Water sample that had the E Coli-positive result.
- 2. Collect the samples within 24 hours of notification of the E Coli-positive Triggered Source Water sample unless the DNR has given you a written extension. Samples must arrive at the lab and be set up for analysis within 30 hours of collection, so take mail delivery time into consideration and plan your collection time accordingly.
- 3. Collect the sample BEFORE treatment.

Southeast Region, Milwaukee:

#### SAMPLING INSTRUCTIONS

- 1. Check with your local post office or commercial carrier to determine what time they will send samples to your laboratory and collect the sample just prior to sending to the laboratory. Samples must be analyzed within 30 hours of collection, so send the sample for guaranteed delivery within 24 hours of sample collection to the laboratory. Plan to send the sample early in the week and avoid Fridays, Saturdays, State and Federal Holidays.
- 2. Avoid plastic, swing, goose-neck, leaky, chrome and outside faucets.
- 3. Remove any faucet aerator, gasket, screen or hose.
- 4. Sterilize the faucet using a propane or butane torch. Hold the flame beneath the faucet opening for 20 seconds. Move the flame continuously to prevent damage to the faucet. Plastic or chrome faucets will melt when heated.
- 5. Run the cold water at medium force for at least 5 minutes before collecting samples. Do not change the flow rate or wash or wipe the tap before collecting the sample.
- 6. Remove the security seal, and then remove the sample bottle cap without touching the inside of the cap or bottle. Hold onto the cap while sampling,
- 7. Fill bottle to within one inch of the top or to the fill line. Replace cap securely. Write name on the side of the bottle.
- 8. Send the water sample and this completed form to a laboratory that is certified under the Safe Drinking Water Act for the testing of total coliform and E. Coli bacteria by an enzyme substrate method, and who reports the results electronically to the DNR.

## For Additional Information, Contact Your Nearest DNR Office

(414) 263-8362

Southeast Region, Milwaukee: Northeast Region, Green Bay: South Central Region, Fitchburg:	(414) 263-8362 (920) 662-5144 (608) 275-3294	West Central Region, Eau Claire: Northern Region, Spooner:	(715) 839-370 (715) 635-210	
Laboratory ID:	Laboratory Name:			
Date Received: / /	Time Received:	Laboratory Sample ID:		
Condition of Sample Upon Receipt			, The street of	
Signature of Receiving Lab Officia	1:	Date Reported to I	PWS: /	/



Wisconsin State Laboratory of Hygiene 2601 Agriculture Drive, PO Box 7996 Madison, WI 53707-7996 (800)442-4618 - Fax (608)224-6213 http://www.slh.wisc.edu

# **Laboratory Report**

**Environmental Health Division** 

WSLH Sample: 814740001

Report To:

CHAD WILLIAMSON

PINE VALLEY COMMUNITY VILLAGE

25951 CIRCLE VIEW DR

RICHLAND CENTER, WI 53851

Invoice To:

TOM RISLOW

25951 CIRCLE VIEW DR

RICHLAND CENTER, WI 53581

Customer ID:

15300648

System Name: PINE VALLEY COMMUNITY

VILLAGE

RICHLAND CENTER

Collection Date/Time: 9/29/2025 09:30

Collected By:

City:

C WILLIAMSON

County: 53 - Richland

Source Code: D-Distribution System

Collection Address: RESERVOIR Location of Sample:

Monitor Point ID: NA

PWS ID#: 15

15300648

WI Unique Well#:

Entry Point ID:

Date Received:

9/29/2025

Date Reported:

9/30/2025

Sample Type:

R-Repeat

## Field Data

Analyte	Analysis Method	Result	Units	LOD	LOQ
Prep Date: No Prep Step	Analysis Date: 09/29/25 16:3	1			
Chlorine Free Available	Field Chlorine Data	.98	mg/L		

## Microbiology

Analyte	Analysis Method	Result	Units	LOD	LOQ	
Prep Date: 09/29/25 12:41	Analysis Date: 09/30/25 16:3	O Prep Method:	SM9223B			
Total Coliform - Colilert	SM9223B	PRESENT	/100mL			
E. Coli - Colilert	SM9223B	PRESENT	/100mL			



Wisconsin State Laboratory of Hygiene 2601 Agriculture Drive, PO Box 7996 Madison, WI 53707-7996 (800)442-4618 - Fax (608)224-6213 http://www.slh.wisc.edu

# **Laboratory Report**

Environmental Health Division

WSLH Sample: 814737001

Report To:

CHAD WILLIAMSON

PINE VALLEY COMMUNITY VILLAGE

25951 CIRCLE VIEW DR

RICHLAND CENTER, WI 53851

Invoice To:

TOM RISLOW

25951 CIRCLE VIEW DR

RICHLAND CENTER, WI 53581

Customer ID:

15300648

System Name: PINE VALLEY COMMUNITY

VILLAGE

City: RICHLAND CENTER

Collection Date/Time: 9/29/2025 08:20

Collected By:

C WILLIAMSON

KITCHEN SINK

County: 53 - Richland

Location of Sample: 4

Source Code: D-Distribution System

Collection Address: RM 170

Monitor Point ID: NA

PWS ID#:

15300648

WI Unique Well#:

Entry Point ID:

Date Received:

9/29/2025

Date Reported:

9/30/2025

Sample Type:

R-Repeat

## Field Data

Analyte	Analysis Method	Result	Units	LOD	LOQ	
Prep Date: No Prep Step	Analysis Date: 09/29/25 15:4	5				_
Chlorine Free Available	Field Chlorine Data	.68	mg/L			

## Microbiology

Analyte	Analysis Method	Result	Units	LOD	LOQ	
Prep Date: 09/29/25 12:41	Analysis Date: 09/30/25 16:30	Prep Method:	SM9223B			_
Total Coliform - Colilert	SM9223B	PRESENT	/100mL			
E. Coli - Colilert	SM9223B	Absent	/100ml			



Wisconsin State Laboratory of Hygiene 2601 Agriculture Drive, PO Box 7996 Madison, WI 53707-7996 (800)442-4618 - Fax (608)224-6213 http://www.slh.wisc.edu

# **Laboratory Report**

Environmental Health Division

WSLH Sample: 814741001

Report To:

**CHAD WILLIAMSON** PINE VALLEY COMMUNITY VILLAGE

25951 CIRCLE VIEW DR

RICHLAND CENTER, WI 53851

Invoice To:

TOM RISLOW

25951 CIRCLE VIEW DR

RICHLAND CENTER, WI 53581

Customer ID:

15300648

System Name: PINE VALLEY COMMUNITY

VILLAGE

City: RICHLAND CENTER

Collection Date/Time: 9/29/2025 09:45

Collected By:

**C WILLIAMSON** 

County: 53 - Richland

Source Code: D-Distribution System

Collection Address: FIRE HYDRANT FARTHEST AWAY FROM

**EVERYTHING ACROSS RD** 

Location of Sample:

**HYDRANT** 

Monitor Point ID: NA

PWS ID#:

15300648

WI Unique Well#:

Entry Point ID:

Date Received:

9/29/2025

Date Reported:

9/30/2025

Sample Type:

I-Investigation

## Microbiology

Analyte	Analysis Method	Result	Units	LOD	LOQ
Prep Date: 09/29/25 12:41	Analysis Date: 09/30/25 14:56	Prep Method:	SM9223B		
Total Coliform - Colilert	SM9223B	PRESENT	/100mL		
E. Coli - Colilert	SM9223B	SM9223B PRESENT			

### Field Data

Analyte	Analysis Method	Result	Units	LOD	LOQ
Prep Date: No Prep Step	Analysis Date: 09/29/25 16:33	3		<del></del>	
Chlorine Free Available	Field Chlorine Data	.59	mg/L		

STATE OF WISCONSIN **DEPARTMENT OF NATURAL RESOURCES** FITCHBURG SERVICE CENTER 3911 FISH HATCHERY RD FITCHBURG WI 53711

Tony Evers, Governor Karen Hyun, Ph.D., Secretary Telephone 608-266-2621 Toll Free 1-888-936-7463



October 6, 2025

PWS ID: 15300648 PWS Type: MC - Richland County

**BRITTANY PAULUS** PINE VALLEY COMMUNITY VILLAGE PINE VALLEY COMMUNITY VILLAGE 25951 CIRCLE VIEW LN RICHLAND CENTER WI 53581

SUBJECT: Rescind Boil Water Notice for PINE VALLEY COMMUNITY VILLAGE

Dear Brittany Paulus:

Investigative samples collected on 10/1/2025 and again on 10/2/2025 were tested and reported to be free of total coliform and E. coli bacteria. As a result, this letter serves as confirmation that the Boil Water Notice formally issued on 9/26/2025 is rescinded.

Water supplied by your system can be used for human consumption. Human consumption means drinking, cooking, food preparation and making ice, dishwashing, and all personal hygiene needs (e.g., showering, hand washing, bathing and oral hygiene).

Contact Lauren Belz at (608)800-2915 or lauren.belz@wisconsin.gov if you have questions related to this rescind notice.

Sincerely,

Kim Barkhahn

Compliance Specialist

Warehim

Bureau of Drinking Water & Groundwater

cc:

Lauren Belz (DNR Rep) - Fitchburg Service Center (via email)

Eileen Pierce (District Supervisor) - Fitchburg Service Center (via email



## Report 1 of 4

## **Wisconsin Department of Natural Resources Laboratory Report**

Laboratory: LV Labs WW, LLC

Lab ID: 122046870

Lab Phone: 608-723-4096

PWS ID #: 15300648

PWS Name: PINE VALLEY COMMUNITY VILLAGE

Sample #: K3289

Sample Date: 10/2/2025

Time: 01:15 PM

PWS Type: MC

Date Received:

Date Reported: 10/4/2025

Sample Source: D Distribution System Sample Type: I

EPA Source ID:

Collected by: C. Williamson

County: Richland Sample Address: Mechanical Room Location Description: Sample Faucet

DNR Rep: BELZ, LAUREN

Analysis Method	Analysis Date	Lab Comment			
Lab Memo:					
Code Description 50064 CHLORINE FREE AVAIL FIELD	MCL	Result Units 0.80 MG/L	<i>Qualifier</i> Field Result	LOD	LOQ

Analysis Method SM 9223 B	Analysis Date	Lab Comment			<u> </u>
Lab Memo:					
Code Description 98931 E Coli - Colisure Presence/Absence	MCL	Result Units ABSENT /100 ML	<i>Qualifier</i> Normal	LOD	LOQ

Analysis Method SM 9223 B	Analysis Date	Lab Comment			
Lab Memo:					
Code Description 99190 Coliform Total - Colisure Presence/Absence	MCL	Result Units ABSENT /100 ML	<i>Qualifier</i> Normal	LOD	LOQ

# **Wisconsin Department of Natural Resources Laboratory Report**

10/6/2025

Report 3 of 4

Laboratory: LV Labs WW, LLC

Lab ID: 122046870

Lab Phone: 608-723-4096

PWS ID #: 15300648

PWS Name: PINE VALLEY COMMUNITY VILLAGE

Sample #: K3291 Sample Date: 10/2/2025

Time: 04:30 PM

PWS Type: MC

Sample Source: D Distribution System

Date Received:

Sample Type: I

Date Reported: 10/4/2025

EPA Source ID:

Collected by: C. Williamson

DNR Rep: BELZ, LAUREN

County: Richland

Sample Address: Community Room

Location Description: Faucet

Analysis Method SM 9223 B	Analysis Date	Lab Commen				
Lab Memo:						
Code Description 99190 Coliform Total - Colisure Presence/Absence	MCL		t <i>Units</i> ' /100 ML	<i>Qualifier</i> Normal	LOD	LOQ
Analysis Method SM 9223 B	Analysis Date	Lab Comment				
Lab Memo:						
Code Description 98931 E Coli - Colisure Presence/Absence	MCL		Units // /100 ML	<i>Qualifier</i> Normal	LOD	LOQ

DNR Drinking Water Program South Central Region

# **BACTERIOLOGICAL ANALYSIS**

Public Water Supply Form Number: 6804 Revision; 20240105

3911 Fish Hatchery Rd (ENCLOSE FORM WHEN SENDING SAMPLE TO LAB) Fitchburg WI 53711 Section I: System Information (to be completed by Department of Natural Resources/SAMPLER) Generated: 9/26/2025 System Name: PINE VALLEY COMMUNITY VILLAGE PWS ID: 15300648 DNR Contact: LAUREN BELZ (608)800-2915 Region: 1 Type: MC System Address: 25951 CIRCLE VIEW DR City: RICHLAND CENTER County: Richland Entry Point ID: WI Unique Well No: Note: System Chlorinates. Sampler Contact Info: (Notify DNR Contact of Corrections) Sampler: (Leave Blank If You Don't Use These Services) (608)647-2138 Provide information to have results faxed or emailed or to WILLIAMSON, CHAD change a billing address, if your lab offers these services Fax Number: 25951 CIRCLE VIEW DR RICHLAND CENTER WI 53581 Email: Billing Address: Sample Source: (Location) Sample Type: (Check Only One) D - Routine Distribution ... W - Well Source \_\_ N - New Construction C\* - Check: Same location as Positive "D" Sample E - Entry Point X I - Investigation R\* - Repeat: Within 5 connects of Positive "D" Sample W - (Raw) Water X D - Distribution System A - Additional Routine (month following positive "D") \*IF THE SAMPLE TYPE IS "C" or "R": "D" or "A" Positive "D" or "A" Positive Sample Date:\_ Sample ID: Special Instructions: Collect Sample between: SAMPLES MUST BE ANALYZED WITHIN 30 HOURS OF COLLECTION. SEE SAMPLING INSTRUCTIONS ON BACK. Section II: Sample Information (to be completed by SAMPLER -ALL ITEMS REQUIRED) 25 (mm/dd/yyyy) Time: Address where sample was collected: Mechanical FOOM Sample Tap Location (e.g. kitchen sink): Monitoring Site ID: First Initial and Last Name of Sampler: C- William Son Sampler Phone: Section III: System Test Result Information for Systems Who Use Continuous Chlorination (to be completed by SAMPLER) If your system uses continuous chlorination, the chlorine residual level at the time the sample was collected must be reported below. Systems who do not continuously chlorinate may skip this section Storet Parameter SDWA Method Results MRDL Units 50060 CHLORINE TOTAL RESIDUAL FIELD MG/L 50064 CHLORINE FREE AVAIL FIELD MG/L 50066 COMBINED AVAILABLE CHLORINE 4.0 MG/L Section IV: Lab Test Results (to be completed by LAB) Lab has 24 hours to electronically report re

2	
V Labs WW,	#105-443

TOTAL COLIFORM					1	E COLI					
Storet	Description	Method		Units		Storet	Description	SDWA		The St. B.	
	Colilert® Presence/Absence			/100 ML		***********	Colilert® Presence/Absence	Method	ALL CANADAM VIEW IN	1	
	Colisure® Presence/Absence	ļ		7100 ML	1		Colisure® Presence/Absence		Nosuk	(100 MI	
	Colisure® Quantitray	derend described		/100 ML		98929	Colisure® Quantitray			/100 MI	
	Colilert®-18 Presence/Absence	 		/100 ML	} !		Colilert®-18 Presence/Absence	5		/100 MI	
	MI Agar Colliert® Quantitray	ļ	TOTAL DE LES PROPERTOS	/100 ML	1	99743	MI Agar			/100 MI	
	Colilert®-18 Quantitray			/100 ML	1 ,		Colilert® Quantitray			/100 MI	
	Colitag <sup>TM</sup>	have never amount	All Marinety; Radio National	/100 ML			Colilert®-18 Quantitray			/100 MI	
	Readycult®.	<b> </b>		/100 ML			Colitag <sup>TM</sup>	 	wracijahanana.	/100 MI	
	E*Colite®			/100 ML	)	, , , , , , , , , , , , , , , , ,	Readycult®		***************	/100 ML	
- Mileton Mileton	Commence of the second of the			/100 ML		99741	E*Colite®		[,	/100 ML	

Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Pailure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis. Stats. and ch. NR 809.80. Personally identifiable information on this form will be used for no other purpose. Reference Requirement #22966613.

DNR Drinking Water Program South Central Region 3911 Fish Hatchery Rd Fitchburg WI 53711

LV Labs WW, LLC

99740 E\*Colite®

## BACTERIOLOGICAL ANALYSIS (ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

Public Water Supply Form Number: 6804 Revision: 20240105 Generated: 9/26/2025

Section I: System Information (to be completed by Department of Natural Resources/SAMPLER) System Name: PINE VALLEY COMMUNITY VILLAGE PWS ID: 15300648 DNR Contact: LAUREN BELZ (608)800-2915 Region: 1 Type: MC System Address: 25951 CIRCLE VIEW DR City: RICHLAND CENTER County: Richland Entry Point ID: WI Unique Well No: Note: System Chlorinates. Sampler Contact Info: (Notify DNR Contact of Corrections) Sampler: (Leave Blank If You Don't Use These Services) (608)647-2138 Provide information to have results faxed or emailed or to WILLIAMSON, CHAD change a billing address, if your lab offers these services Fax Number: 25951 CIRCLE VIEW DR Email: RICHLAND CENTER WI 53581 Billing Address: Sample Source: (Location) Sample Type: (Check Only One) \_\_ D - Routine Distribution .... W - Well Source N - New Construction \_\_\_ C\* - Check: Same location as Positive "D" Sample \_\_ E - Entry Point X I - Investigation R\* - Repeat: Within 5 connects of Positive "D" Sample ..... W - (Raw) Water X D - Distribution System \_ A - Additional Routine (month following positive "D") \*IF THE SAMPLE TYPE IS "C" or "R": "D" or "A" Positive "D" or "A" Positive Sample Date: \_\_/\_ Sample ID: Special Instructions: SAMPLES MUST BE ANALYZED WITHIN 30 HOURS OF Collect Sample between: and COLLECTION. SEE SAMPLING INSTRUCTIONS ON BACK. Section II: Sample Information (to be completed by SAMPLER -- ALL ITEMS REQUIRED) Sample Collection Date: 10/1/125 (mm/dd/yyyy) Time: 10 : 00 D.m. Op.m. Address where sample was collected: Reservoir Sample Tap Location (e.g. kitchen sink): First Initial and Last Name of Sampler: C- Williamson Sampler Phone: 485+0903 Section III: System Test Result Information for Systems Who Use Continuous Chlorination (to be completed by SAMPLER) If your system uses continuous chlorination, the chlorine residual level at the time the sample was collected must be reported below. Systems who do not continuously chlorinate may skip this section. Storet Parameter SDWA Method MRDL 50060 CHLORINE TOTAL RESIDUAL FIELD 4.0 MG/L 50064 CHLORINE FREE AVAIL FIELD 4.0 MG/L 50066 COMBINED AVAILABLE CHLORINE Section IV: Lab Test Results (to be completed by LAB) Lab has 24 hours to electronically report results to DNR per NR 809.80 TOTAL COLIFORM E COLI SDWA SDWA Storet Description Method Result Units Storet Description Method Result Units 99060 Colilert® Presence/Absence  $100 \, \mathrm{ML}_{1}$ 99069 Colilert® Presence/Absence 100 MIL 99190 Colisure® Presence/Absence 100 ML 98931 Colisure® Presence/Absence TIOO MIL 99192 Colisure® Quantitray 98929 | Colisure® Quantitray /100 ML  $/100 \, \mathrm{ML}$ 99189 Colilert@-18 Presence/Absence /100 MJL 98932 | Colifert®-18 Presence/Absence /100 ML 99742 MI Agar  $/100 \, ML$ 99743 MI Agar /100 ML 99118 Colilert® Quantitray  $1/100 \, MUL$ 99188 Colilert® Quantitray /100 ML 99191 Colilert D-18 Quantitray /100 ML 98930 |Colilert®-18 Quantitray /100 ML 99829 Colitag™ /100 MIL 99828 Colitag™  $/100 \, ML$ 99961 Readycult® /100 ML 99962 Readycult®  $/100\,\mathrm{ML}$ 

/100 ML: Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis. Stats, and ch. NR 809.80. Personally identifiable information on this form will be used for no other number. Deference Dentificant #22066612

99741 E\*Colite®

/100 ML



## Fw: Pine Valley Community Village - 15300648 - TCP Lab Report & CRT Lab Slips

From Brittany Paulus <bri> srittany.paulus@co.richland.wi.us>

Date Thu 9/25/2025 1:03 PM

2 attachments (4 MB)

Pine Valley Community Village - 15300648 - TCP Lab Report.pdf; Pine Valley Community Village - 15300648 - CRT Lab Slips.pdf;

Good Afternoon,

Please see attached for water report. I do not have Brandons email to CC him on it.

So far we have:

Stopped any drinking of the water from tap

We have purchase sterilized water at Walmart and have Culligan bringing a rack of 5 gallon drinking water

I have stopped showers for now

We have reached out to our medical director

I have reached out to DHS for additional information.

If you could please share the Coliform fact sheet that we can hand to our residents that would be great.

Brittany Paulus

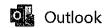
Licensed Nursing Home Administrator

Pine Valley Community Village

25951 Circle View Ln

Richland Center, WI 53581

(608) 647-2138



## Re: Pine Valley Community Village - 15300648 - TCP Lab Report & CRT Lab Slips

From Brittany Paulus <bri>hrittany.paulus@co.richland.wi.us>

Date Fri 9/26/2025 7:57 AM

To Kimberly.Barkhahn@wisconsin.gov < Kimberly.Barkhahn@wisconsin.gov>; lauren.belz@wisconsin.gov < lauren.belz@wisconsin.gov>

Cc Chad Williamson <chad.williamson@co.richland.wi.us>

## Good Morning,

I wanted to touch base in regards to getting our sample results.

- Could you please also add me to the emails from the water sample results as this is crucial for me to implement the necessary protocol for our building when we have contaminated water. Chad leaves for the day at 3pm and I am usually here until after 4pm and have access to my email after hours as well.
- We have a vulnerable population as we are a skilled nursing facility, if there is contaminates, we do need a call so we can implement responses immediately.
- We needed to stop usage of our water immediately upon learning of this potential bacteria in our water source until the second testing was completed.

Please let me know if you have any questions in regards to this.

**Brittany Paulus** 

Licensed Nursing Home Administrator

Pine Valley Community Village

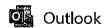
25951 Circle View Ln

Richland Center, WI 53581

(608) 647-2138

From: Chad Williamson <chad.williamson@co.richland.wi.us>

Sent: Thursday, September 25, 2025 11:46 AM



# RE: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance -- Boil Water Notice Required

From Rosewood, Alyssa M - DNR <alyssa.rosewood@wisconsin.gov>

Date Mon 9/29/2025 8:06 AM

To Angela Wall <angela.wall@co.richland.wi.us>; Brittany Paulus <brittany.paulus@co.richland.wi.us>

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Thanks Angela,

We will update our database to make sure Brittany is included on all future correspondence.

Alyssa Rosewood Compliance Specialist -Drinking Water & Groundwater Program Wisconsin Department of Natural Resources Mobile: 414-309-7713

alyssa.rosewood@wisconsin.gov



dnr.wi.gov

Our core values include professionalism, integrity, and customer service.

Please visit our <u>survey</u> to provide feedback on your experience interacting with any DNR employee.



From: Angela Wall <angela.wall@co.richland.wi.us>

Sent: Monday, September 29, 2025 7:48 AM

To: Brittany Paulus <bri>ttany.paulus@co.richland.wi.us>

Cc: Rosewood, Alyssa M - DNR <alyssa.rosewood@wisconsin.gov>

Subject: FW: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance -- Boil Water Notice

Required

Importance: High

CAUTION: This email originated from outside the organization.

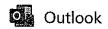
Do not click links or open attachments unless you recognize the sender and know the content is safe.

Alyssa please make sure that you include Brittany on these email as she is the new administrator at Pine Valley, you can remove me this email.

From: Rosewood, Alyssa M - DNR <alyssa.rosewood@wisconsin.gov>

Sent: Friday, September 26, 2025 12:44 PM

To: Angela Wall <angela.wall@co.richland.wi.us>; Chad Williamson <chad.williamson@co.richland.wi.us>



# Fw: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance -- Boil Water Notice Required

From Chad Williamson <chad.williamson@co.richland.wi.us>

Date Fri 9/26/2025 1:55 PM

To Brittany Paulus <bri>drittany.paulus@co.richland.wi.us>

🎚 3 attachments (571 KB)

15300648 Pine Valley Community Village\_E. Coli MCL Letter\_09.26.2025.pdf; Pine Valley Community Village Investigative Lab Slip.pdf; 15300648 Pine Valley Community Village CRT Results\_09.25.25.pdf;

From: Rosewood, Alyssa M - DNR <alyssa.rosewood@wisconsin.gov>

Sent: Friday, September 26, 2025 12:44 PM

To: Angela Wall <angela.wall@co.richland.wi.us>; Chad Williamson <chad.williamson@co.richland.wi.us>

Cc: Barkhahn, Kimberly N - DNR (Kim) < Kimberly.Barkhahn@wisconsin.gov>; Pierce, Eileen F - DNR

<Eileen.Pierce@wisconsin.gov>; Kubly, Amy L - DNR <Amy.Kubly@wisconsin.gov>; Belz, Lauren J - DNR

<lauren.belz@wisconsin.gov>

Subject: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance -- Boil Water Notice Required

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hello Angela and Chad,

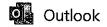
The check, repeat, and triggered samples for PINE VALLEY COMMUNITY VILLAGE/15300648 that were collected on 09/25/2025 show that the check sample is total coliform positive and E.coli positive. The repeat sample is total coliform positive and E. coli negative. The triggered sample is total coliform negative and E. coli negative. I have attached the lab reports for your convenience. This is an acute MCL violation and you are required to post a boil water notice as soon as possible (but no later than 24 hours of receipt of this email). See the attached letter for more information, including a boil water notice template.

A Level 2 Assessment will need to be completed within 30 days by a DNR Representative. A DNR Representative will be contacting you to schedule a Level 2 Assessment and discuss follow-up requirements. An investigative lab slip is attached.

For additional information regarding the assessment or technical questions, please contact DNR Rep, Amy Kubly at 608-219-3068. Amy is covering for your assigned DNR Rep, Lauren Belz, today.

Thank you,

Alyssa Rosewood Compliance Specialist -Drinking Water & Groundwater Program



## Re: Pine Valley Community Village - 15300648 - TCP Lab Report & CRT Lab Slips

From Brittany Paulus <bri> sprittany.paulus@co.richland.wi.us>

Date Fri 9/26/2025 11:37 AM

To Brandt, Juli A - DHS <juli.brandt@dhs.wisconsin.gov>

Hi Juli,

Second tests came back positive for Coliform and this time with small traces of E.coli.

**Brittany Paulus** 

Licensed Nursing Home Administrator

Pine Valley Community Village

25951 Circle View Ln

Richland Center, WI 53581

(608) 647-2138

From: Brittany Paulus <bri>drittany.paulus@co.richland.wi.us>

Sent: Friday, September 26, 2025 10:40 AM

To: Brandt, Juli A - DHS <juli.brandt@dhs.wisconsin.gov>

Subject: Fw: Pine Valley Community Village - 15300648 - TCP Lab Report & CRT Lab Slips

**Brittany Paulus** 

Licensed Nursing Home Administrator

Pine Valley Community Village

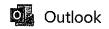
25951 Circle View Ln



Our core values include professionalism, integrity, and customer service.

Please visit our <u>survey</u> to provide feedback on your experience interacting with any DNR employee.





## RE: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance

From Brandt, Juli A - DHS <Juli.Brandt@dhs.wisconsin.gov>

Date Mon 9/29/2025 6:33 AM

To Pintar, Paula A - DHS <paula.pintar@dhs.wisconsin.gov>; Brittany Paulus <bri>brittany.paulus@co.richland.wi.us>; Koske, Sarah E - DHS <Sarah.Koske@dhs.wisconsin.gov>; Meiners, Bruce E - DHS <br/>
Frances.Goglio@dhs.wisconsin.gov>

Cc DeSalvo, Traci E - DHS <Traci.DeSalvo@dhs.wisconsin.gov>; DHS DPH Enterics <DHSDPHEnterics@dhs.wisconsin.gov>

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Thank you!

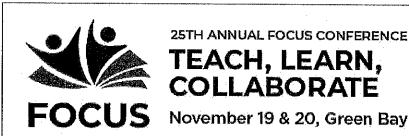
Best Regards,

. Juli Brandt, RN

Juli Brandt, RN, WCC, QIDP Regional Field Operations Director Division of Quality Assurance Bureau of Nursing Home Resident Care

Juli.Brandt@dhs.wisconsin.gov

Phone: 608-266-9422 Cell: 608-220-5278







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Pine Valley Community Village

25951 Circle View Ln

Richland Center, WI 53581

(608) 647-2138

From: Brandt, Juli A - DHS < Juli. Brandt@dhs.wisconsin.gov>

Sent: Friday, September 26, 2025 4:05 PM

To: Koske, Sarah E - DHS < Sarah. Koske@dhs.wisconsin.gov >; Meiners, Bruce E - DHS

<br/>brucee.meiners@dhs.wisconsin.gov>; Pintar, Paula A - DHS paula.pintar@dhs.wisconsin.gov>; Brittany Paulus

<bri>hrittany.paulus@co.richland.wi.us>; Goglio, Frances C - DHS < Frances.Goglio@dhs.wisconsin.gov>

Cc: DeSalvo, Traci E - DHS < Traci.DeSalvo@dhs.wisconsin.gov>; DHS DPH Enterics

<<u>DHSDPHEnterics@dhs.wisconsin.gov</u>>; Meiners, Bruce E - DHS <<u>brucee.meiners@dhs.wisconsin.gov</u>>

Subject: RE: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance

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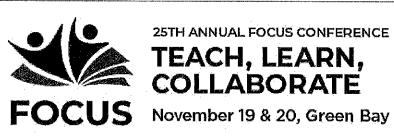
Thank you all for your assistance and input for Pine Valley Community Village.

They have received a letter from the DNR and are actively working on their public notice as we speak.

Best Regards, Juli Brandt, RN

Juli Brandt, RN, WCC, QIDP Regional Field Operations Director Division of Quality Assurance Bureau of Nursing Home Resident Care Juli.Brandt@dhs.wisconsin.goy

Phone: 608-266-9422 Cell: 608-220-5278





If the sample represents the buildings potable water distribution system, there could be a cross connection between the buildings sewer system/drain piping and the buildings potable water distribution system.

Regards,

**Bruce Meiners** 

Legionella Industrial Hygienist

ASSE 12080-Certified Legionella Water Safety and Management Specialist

Wisconsin Department of Health Services | Division of Public Health | Bureau of Communicable Diseases

D: (608) 267-1887 | C: (608) 471-2812 | Fax (608) 261-4976

brucee.meiners@dhs.wisconsin.gov

Sent: Friday, September 26, 2025 3:10 PM

To: Brittany Paulus < brittany.paulus@co.richland.wi.us >; Goglio, Frances C - DHS

< Frances. Goglio@dhs.wisconsin.gov>; Meiners, Bruce E - DHS < brucee.meiners@dhs.wisconsin.gov>

Subject: RE: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance

Brittany from what you are describing I am concerned your well may be getting contaminated from the agricultural run-off. Unless you have damaged pipes, it should not be entering your system that way. The road construction may also be causing vibration and releasing biofilm into your water system. I see Frances responded too, in light of the no water use to Frances's point keep flushing all fixtures until this can be resolved.

Respectfully,

Paula

Paula Pintar, MSN, RN, ACNS-BC, AL-CIP, FAPIC (she/her/hers)

Infection Preventionist (Region 6)

Healthcare-Associated Infections (HAI) Prevention Program | Bureau of Communicable Disease | Division of Public Health

**Wisconsin Department of Health Services** 

Phone: 608-471-0499 | Email: paula.pintar@dhs.wisconsin.gov





\*\*\*\*\*\*\*

Visit us online at: www.dhs.wisconsin.gov

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**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Oh no and on a Friday afternoon!

I am including our Legionella team too but in addition here are some resources and actions to add to what you have already done.

- I am assuming these coliform and E.coli levels are above acceptable.
- If your well is clean, then it is most likely in the pipe biofilm
  - How many empty or low use rooms do you have in the facility?
  - Flush these rooms and every water outlet, hot and cold for at least 10 minutes per day. Try twice a day if they have been empty for longer than 3 consecutive days.
- · What are you doing for bathing needs?
  - Do you have access to bathing wipes?
- Do you have a contracted water management specialist?
  - You may be able to get some point of use filters, these need to be purchased through a vendor and can't be bought at Menards or anything like that. May be difficult at this late time on a Friday.

#### Resources:

<u>Legionella prevention</u>- many similar strategies

### Frances and Bruce what have I missed?

Respectfully,

Paula

## Paula Pintar, MSN, RN, ACNS-BC, AL-CIP, FAPIC (she/her/hers)

Infection Preventionist (Region 6)

Healthcare-Associated Infections (HAI) Prevention Program | Bureau of Communicable Disease | Division of Public Health

### **Wisconsin Department of Health Services**

Phone: 608-471-0499 | Email: paula.pintar@dhs.wisconsin.gov





Visit us online at: www.dhs.wisconsin.gov

\*\*\*\*\*\*

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From: Brittany Paulus < brittany.paulus@co.richland.wi.us >

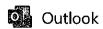
Sent: Friday, September 26, 2025 2:34 PM

To: Pintar, Paula A - DHS <paula.pintar@dhs.wisconsin.gov>

Subject: PINE VALLEY COMMUNITY VILLAGE/15300648 - E. Coli MCL Exceedance

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## Re: Inspection report

From Brittany Paulus <bri>hrittany.paulus@co.richland.wi.us>

Date Sun 9/28/2025 2:38 PM

To Sam Paque <sam@watertowerusa.com>

Hi Sam.

We have coliform in our water plus traces of ecoli. However, the well water is clear but is in our building. My thoughts is that construction may have vibrated the pipes and potentially allowed for agriculture runoff. So I just want to ensure pipes look good and no cracks etc.

Sent from my U.S.Cellular® Smartphone Get <u>Outlook for Android</u>

From: Sam Paque <sam@watertowerusa.com> Sent: Sunday, September 28, 2025 2:20:30 PM

To: Brittany Paulus <bri>ttany.paulus@co.richland.wi.us>

Subject: Re: Inspection report

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Brittany,

Sorry I missed you last week, ill try getting in touch monday. We've inspected pipes before, just depends on the situation.

Sam 6082348932

Sent from my Verizon, Samsung Galaxy smartphone Get Outlook for Android

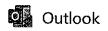
From: Brittany Paulus <bri>brittany.paulus@co.richland.wi.us>

**Sent:** Friday, September 26, 2025 12:15:44 PM **To:** Sam Paque <sam@watertowerusa.com>

Subject: Re: Inspection report

Hi Sam,

Could you please give me a call? I need to know if you are able to put cameras through our piping leading up to our building?



### BCD call

From Brandt, Juli A - DHS <Juli.Brandt@dhs.wisconsin.gov>

Date Fri 9/26/2025 3:48 PM

To Brittany Paulus <bri>drittany.paulus@co.richland.wi.us>

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I received a call from BCD no reporting to them. Just be sure to follow your water management program and please reach out to DNR ASAP to schedule that level 2.

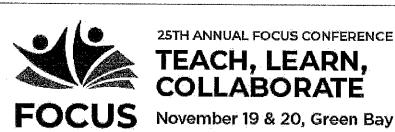
Best Regards,

, Juli Brandt, RN

Juli Brandt, RN, WCC, QIDP
Regional Field Operations Director
Division of Quality Assurance
Bureau of Nursing Home Resident Care
Juli.Brandt@dhs.wisconsin.gov

Phone: 608-266-9422

Cell: 608-220-5278







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### Jesi Towne

From:

Jesi Towne

ent:

Friday, September 26, 2025 11:33 AM

To:

Melissa Wertz

Subject:

RF:

Ok we have new information that I was hoping you could now share. We received the results from yesterdays test the water at Pine has tested positive for Coliform (this we knew yesterday) and now also E. Coli. We are still monitoring the residents for any GI symptoms and we have not been utilizing the water for consumption.

New Towns -Don

Can you please share this??

Jesi Towne RN, BSN, DON-C Pine Valley Community Village 25951 Circle View Lane

Richland Center, WI 53581

608-647-2138 EXT: 1722 or 608-649-1722

From: Melissa Wertz < Melissa. Wertz@richlandhospital.com >

Sent: Friday, September 26, 2025 9:11 AM o: Jesi Towne <jesi.towne@co.richland.wi.us>

Subject: Re:

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Yes I will do this now. Thank you! Sent from my iPhone

On Sep 25, 2025, at 1:04 PM, Jesi Towne < jesi.towne@co.richland.wi.us > wrote:

Hello can you please share with all the physicians that today we learned that our water tested positive for Coliform bacteria. We have updated public health. Created a symptoms monitoring form for every shift to monitor for Nausea, vomiting and diarrhea, we bought Walmart out of bottled water and have culligan bringing more water this afternoon. We have updated the state and our medical director. We have no symptomatic resident in the building. We are running another test. No showers for tonight and tomorrow morning to decrease risk of consuming the water and have posted signs on all water areas that water is out of order. Will re group tomorrow when test results come in which will hopefully be by noon.

Jesí Towne RN,BSN, DON-C Pine Valley Community Village

fentowe RV-DON

Popus of World Expense [150VD1(05

Give us feedback @ survey.walmart.com Thank you! ID #:7VQQGBBXGTH

# Walmart ≥'≤



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the data elements required on the form) to a state that would otherwise be due tax on this sale. The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption. Type of Business GOVERNMENT (5) Reason for exemption government (5)

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241 W Haseltine ST Richland Center, WI 53581 www.culliganofsouthwestwisconsin.com (608) 647-3444

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09/30/2025		нія <b>ам</b> ю имт 444.42	ACCOUNT NUMBER 13748			
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ADDRESSEE:

PINE VALLEY COMMUNITY VILLAGE 25951 CIRCLE VIEW DRIVE RICHLAND CENTER, WI 53581 REMIT PAYMENT TO:

KRAEMER'S WATER STORE PO BOX 602 RICHLAND CENTER, WI 53581-0602

BALANCE FORWARD
RETURN THIS TOP PORTION WITH YOUR PAYMENT BRANCH ID: KC-RC CUSTOMER: PINE VALLEY COMMUNITY VILLAGE PREVIOUS BALANCE: \$180.22 DATE **OUAN TITY** DESCRIPTION REF AMOUNT BALANCE 09/19/2025 09/19/2025 09/19/2025 09/25/2025 09/25/2025 09/29/2025 09/29/2025 09/29/2025 09/29/2025 09/29/2025 09/29/2025 09/29/2025 09/30/2025 09/30/2025 09/30/2025 320,14 320,14 323,39 539,39 122770 122770 12.00 SOLAR SALT 50LB DELIVERED 139.92 TEST KIT
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ENERGY SURCHARGE
COOK N COLD WATER DISPENSER -1.00 32.00 32.00 4.00 3.00 575.17 791.17 -180.22 EMERGENCY EMERGENCY EMERGENCY 216.00 1007.17 1014.85 1019.44 216,00 7.68 **EMERGENCY** 4.59 216.00 114.75 32.00 17.00 1350.19 10.48 3.25 1.00 1360.67 1363.92 1444.42 1.00 80.50 7.00 de estado de Service 10/01-10/31 ACCOUNTE AND SALES TO A LAYE PAYMENT PINANCE CHARGE
FINANCE CHARGE SCHEDULE
PRINCE CHARGE SCHEDULE
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ANDREASE 4 1.50 % 18.00 % **OCT 12** Balance Due \$1444.42 SI CHARLE 0.00 0,50 0.00 0-30 31-60 61-90 Over 90 Next Deliveries: 10/17/25 11/14/25 12/12/25 01/09/26 1444.42 0.00 0.00 0,00 Kraemer s Water Store 241 W Haseltine ST Richland Center, WI 53581 HAPPY HALLOWEEN! (608) 647-3444 BERMGE ADDRESS: (800) 889-2837 PINE VALLEY COMMUNITY VILLAGE 25951 Circle View Drive Richland Center, WI 53581 ACCOUNT NUMBER NAME CLOSING DATE 09/30/2025 13748 PINE VALLEY COMMUNITY VILLAGE



195 RICHLAND SQ RICHLAND CENTER, WI 608-383-0979

Ticket: 162109 Date: 9/30/25 Store: 2301 Cashier: Scott

Time: 2:08 PM Register: 1

Item Oty Price 275 GAL CAGED WATER TANK Amount 1105722 369.99 739,98

> 739.98 40.70 Subtotal Tax 780.68 Total

Visa 780.68 - SALE

\*\*\*\*\*\*\*\*\*\*\*5232 - EMV Chip

Authorization #: 410380 Terminal ID : 001792301000100 Cryptogram : 0180807408280015

AID : A0000000031010 APP : VISA CREDIT CVM : NONE / SE0000

TVR : 80000008000 / TSI : 6800

Change 0.00I agree to pay the above amount according to my card lesuer agreement.

Neighbor's Club makes Life Out Here more rewarding Download the Tractor Supply mobile app,go to www.neighborsclub.com, or ask a team member to join or for more details on points earning, rewards and more.

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www.TractorSupply.com/TSCCard or see a
team member for more details. 

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(Awarded as Gift Cards) Ends 12/31/2025 Click on "Sweepstakes Rules" for complete details or to participate complete details or to participate without purchase or survey. \*\*\*\*\*\*\*\*\*\*\*\*\*\*

Enter Survey Code #: 2301-01-162109-093025-1408-0 SOLD ITEM COUNT = 2

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位。由中国研究的特别的基础的特别。2014年 provide this exemption certificate (or the data elements required on the form) to a state that would otherwise be due tax on this sale. The purchaser will be held Hable for any tax and interest, and possibly civil and criminal penalties imposed by the member state. If the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an enlity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

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Reason for

declare that the information on this rillicate is correct and complete to est of my knowledge and belief.

EXEMPT SALE



### Details for Order #113-3565598-3960203

Order Placed: October 1, 2025

Amazon.com order number: 113-3565598-3960203

Order Total: \$179,91

### **Not Yet Shipped**

Items Ordered

Price

5 of: Portable Shower for Camping, 6000mAh Rechargeable Camping Shower with 5.3 Gallons Foldable Bucket, Filtered Shower

\$39.98

Outdoor Camp Shower Pump for Hiking, RV, Traveling, Car Washing, Pet Bath

Sold by: FORESI (seller profile)

Condition: New

Shipping Address:

Kayla Kaderavek

25951 CIRCLE VIEW DR

RICHLAND CENTER, WI 53581-4013

United States

Shipping Speed:

FREE Shipping

## Payment information

**Payment Method:** 

Visa | Last digits: 5232

Item(s) Subtotal: \$199.90

Shipping & Handling: \$6.99

Billing address

Promotion applied: -\$26.98

Kayla Kaderavek

Total before tax: \$179.91

25951 CIRCLE VIEW DR RICHLAND CENTER, WI 53581-4013

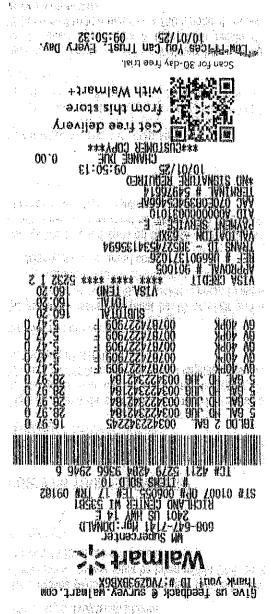
**United States** 

**Estimated Tax:** \$0.00

Grand Total: \$179.91

To view the status of your order, return to Order Summary.

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podria ganar una de las 5 tarjetas de regalo de Walmart de \$1000 o una de las 750 tarjetas de regalo de Walmart de \$100.

http://www.survey.walmart.com

No purchase necessary. Must be 18 or older and a legal resident of the 50 US, DC, or PR to enter. To enter without purchase and for official rules, visit www.entry.survey.walmart.com.

Sweepstakes period ends on the date outlined in the official rules. Survey must be taken within ONE week of today. Void where prohibited.

THANK YOU

## **HOW WAS YOUR EXPERIENCE?**

Tell us about your visit today and you could win 1 of 5 \$1000 Walmart gift cards or 1 of 750 \$100 Walmart gift cards.

Room Range: 601-616

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Room Range: 200-220

Room #	Date	Time OFF	Staff Initials (OFF)	Time ON	Staff Initials (ON)	Notes/Comments
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219	7					
220		1		A		

Room Range: 300-320

Room #	Date	Time OFF	Staff Initials (OFF)	Time ON	Staff Initials (ON)	Notes/Comments
300	10/1/25	2:30	CW	1:50	le	
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302						
303						
304			<u> </u>			
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319						
320	10/					

Room Range: 400-420

Room#	Date	Time OFF	Staff Initials (OFF)	Time ON	Staff Initials (ON)	Notes/Comments			
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418									
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Room Range: 500-520

Room #	Date	Time OFF	Staff Initials (OFF)	Time ON	Staff Initials (ON)	Notes/Comments
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Rooms Wot Flushed

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1/25/25 rochers

DNR Drinking Water Program South Central Region 3911 Fish Hatchery Rd Fitchburg WI 53711

# BACTERIOLOGICAL ANALYSIS

# (ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

Public Water Supply Form Number: 6804 Revision: 20240105 Generated: 9/26/2025

Section 1: System Information	n (to be compl	eted by	Departn	nent o	f Natur	al Resources/SAN	IDI PD	`		GOAGIG	W. 7120/202		
System Name: PINE VALLE	EY COMMU	NITY V	ILLAC	Æ	A Tiensede	ii ixesuules/deli	Trlen		uo m	150	20740		
DNR Contact: LAUREN BELZ (608)800-2915 System Address: 25051 CIPCLE VIVINGE						· 1 Time MC		E Y	VS ID: ■ BBI BOOK	PCCL HISTORY	00648		
System Address: 25951 CIRCLE VIEW DR						LIL AND CONTO				oria dili			
Entry Point ID: WI	Unique Well 1	Vo:	T / NOTE DE STATE SES Sous Telescomp you	Not	a Creto	TEAND CENT	EK	Cou	nty: <u>Kic</u>	hland	et i parantipi, tipi, koskelen kosti jenek ngje		
Sampler Contact Info: (Notifi	v DNR Contact	of Corre	otione)		Sampler: (Leave Blank If You Don't Use These Services)								
(608)647-2138		Provide i	: (Leave Blank II :	You Don' results :	't Use faxed	These S	ervices)						
WILLIAMSON, CHAD	- E	Provide information to have results faxed or emailed or to change a billing address, if your lab offers these services											
25951 CIRCLE VIEW DR					Fax Number:								
RICHLAND CENTER WI 535	81			١,	ALPARATES								
	]	Billing Address:											
Comple Complete (7 and 1)		The strange on the Walk of History of Columns and the Strange of S											
Sample Source: (Location)	Sample Typ			•				72		***************************************	A STATE OF THE PARTY OF THE PAR		
W - Well Source	D - Rout	ine Dist	ribution	. •				N -	New C	onstruc	tion		
E - Entry Point	C* - Che	ck: Sam	e locati	on as	Positive	"D" Sample			nvestig				
•									_				
X D - Distribution System		R* - Repeat: Within 5 connects of Positive "D" Sample  A - Additional Routine (month following positive "D")  W - (Raw) Water											
	*IF THE SA	MPLE	TVPE	TG "C	'''	R": "D"	(  A 51 T						
:	"D" or "A" P	ositive	Sample	Date	,	Sam	0f "A" l	Positi	ve				
Special Instructions:													
Collect Sample between:	and		antennitive an adjustica	Si	AMPLES	MUST BE ANAL	YZED V	VITH	IN 30 H	OURSO	F		
Section II: Sample Informatio	n (to be comp)	atad bu	C'ABADY	CO)	LLECTI	ON. SEE SAMPLI	NG INS	TRUC	TIONS	ON BA	Ĉĸ.		
Sample Collection Date: 117	/ /h / 2 %	Grown	JAMERI	·LK ~	· Allılı I I	EMS REQUIRE	D)	,					
Sample Collection Date: 10		mi (min	/dd/yyy	y) (1	ime:	<u> </u>	3 a.m. 🎗	¶p.m					
Address where sample was co	ttected:		HET M	nitip	urpose	room		-mu-ninkard		acedon mercuntillerist tile er	the special formula to come against		
Monitoring Site ID: 555	Sample T	ap Loca	tion (e.g	z. kite	hen sink	c): sin/		······································	والمراجعة المراجعة ا	A1PTMPONENCE AND			
rust initial and Last Name of	Sampler: C	- W	1160	MS0.	n	Sampler	Phone:	:	485-	0903	•		
Section III: System Test Result	Information	for Syst	ems Wh	o Use	Continu	ious Chlorination	(to be	comp	leted by	SAMP	LER)		
If your system uses comust be repo	ontinuous chl rted below Sy	orinatio	n, the cl	llorin	e residu	al level at the tim	e the sa	imple	was co	llected			
Storet Pare	meter	DPOLITS Y	YIO CO I	IOI CO	SDW	A Method	y skip t	his se	ection. sults	MRDL	Units		
50060 CHLORINE TOTAL	RESIDUAL FII	BLD	!		PALMA SERVICE OF THE PARTY OF T	Company of the Streets and States Control of the Streets and	Meter Halenanian is a paragraphic distribution of the control of t		William de Le pu	4.0			
50064 CHLORINE FREE A				Miller of Matheway and party and	7.7	7		F) ************************************	*	4.0	t to to large being specification		
50066 COMBINED AVAILA	ABLE CHLORI	NE			500 OF COURSE STREET, ST. CO.	d mystle fly i syrinesia og dy hillio 1824-1844 flyrid a reamente (y karatta a red a dig di s		9: ************************************	alledene ne se peneger sport	4.0	Hittiaan aras dipayaya		
ection IV: Lab Test Results (t	o be complete	l by LA	B) Lab	has 24	hours t	o electronically r	enort vo	guite	to DND	TOP NI	2000 00		
TOTAL CO	LIFORM					o vice et dineanly i	E CO		io DMI	per iv	. 003.00		
Storet Description	SDWA	T) 14	NICE Mediania man			ng liping balah 1942 <sub>agam</sub> an menghapang penggangan penggangan penggangan dan dan dan dan dan dan dan dan dan d			SDWA	alde Alancia po dell'anconstitutation			
99060 Colilert® Presence/Absen	Method		Units		Storet	Descrip		••••	Method	Result	Units		
99190   Colisure® Presence/Abser			/100 ML <b>/</b> 00 ML			Colilert® Presence/Absence					/100 ML		
99192 Colisure® Quantitray	IIICC	All Market Street	/100 ML		1					(b)ev	100 ML		
99189 Colilert®-18 Presence/Ab	sence		/100 ML		98929	Colisure® Quantit		· · · · · · · · · · · · · · · · · · ·	TT MIRALANDAN AND AND AND AND AND AND AND AND AN		/100 ML		
99742 MI Agar	DOLLOW		/100 ML		98932	Colilert®-18 Prese	nce/Abse	ence	AMILLANO AMINO,		/100 ML		
99118 Colilert® Quantitray	Providence in control of the control	***************************************	/100 ML		***************************************	MI Agar Colilert® Quantitr	• ************************************	vincent seem		Widow Kalendary	/100 ML		
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Notice: This form must be submitted	with laboratory		~~~	detar	and of LASSISSION	چې بې بې <del>د د د د د د د د د د د د د د د د د د د</del>	ΔΔ 372°-	<u> </u>					
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Nonce: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis. Stats. and ch. NR 809.80. Personally identifiable information on this form will be used for no other purpose. Reference Re

**DNR** Drinking Water Program South Central Region 3911 Fish Hatchery Rd Fitchburg Wi 53711

# BACTERIOLOGICALANALYSIS

(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

Public Water Supply Form Number: 6804 Revision: 20240105

	Section 1	: System Information	(to be co	mplet	ed by I	)epartmen	nt of N	atural	Resources/SAMP	CRB7		Generate	1: 9/26/2025	
	System I	Name: PINE VALLE	у сом	MUN	ITY V	LLAGE			Manager Control of the Control of th		S ID:	1520	2640	
	DNR Co	ntact: LAUREN BE	LZ (608)	800-2	915	المستريان والراج المستريدة والمؤافرة والمؤافرة والمؤافرة	Re		1 Type MC		EQUITATION A LOS TITAS	1530	/048  861 161) 186	
	System Address: 25951 CIRCLE VIEW DR						Region: 1 Type: MC							
	Entry Point ID: WI Unique Well No: Note: System Chlorinates.											r Promitisk Milled on program proje		
	Sampler Contact Info: (Notify DNR Contact of Corrections (608)647-2138 WILLIAMSON, CHAD 25951 CIRCLE VIEW DR RICHLAND CENTER WI 53581					ctions)	Sampler: (Leave Blank If You Don't Use These Services) Provide information to have results faxed or emailed or to change a billing address, if your lab offers these services Fax Number: Email:							
13466 2016.25 1015.408								Billing Address:						
2370	Sample	Source: (Location)	Sample	Туре	: (Chec	k Only O	ne)		the series of th	and the property of a compared to twee spine a beautiful	**************************************	## ***********************************		
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, id.			C* - Check: Same location as Positive "D" Sample  X I - Investigati								IOH			
Levis	L H -	Entry Point								W -	_	_		
10,10,	XD-	Distribution System	R* - Repeat: Within 5 connects of Positive Distribution System  A - Additional Routine (month following page 1)							٧٧	(Kaw)	water		
KIChia		·		*IF THE SAMPLE TYPE IS "C" or "R": "D" or "A" Positive										
<b>R</b> , ,			Sample Da	ate:	/ K	Sampl	"A" rosiu - ID	ve						
	Special I	nstructions:		•									regula printer din	
Rel's	Collect S	Sample between:	Married Property and State of	and	ie manistrativi jegovje		SAN	<b>IPLES</b>	MUST BE ANALY	ED WITH	N 30 H	OURS O	P	
No.	Section I	I: Sample Informatio	n (to be c	omnie	ted by	SAMPI IN	COLL	ECTIO	DN. SEE SAMPLING	GINSTRUC	CTIONS	ON BA	Ж.	
اندرلان	Section II: Sample Information (to be completed by SAMPLER - ALL ITEMS REQUIRED)  Sample Collection Date: 10 / 15/25 (mm/dd/yyyy) Time: 5: 35 Ma.mOp.m.													
10	Address	where sample was co	······································		برينيا: معرفها	ldeilyyyy) Ideilysia as	111	ivaminity iio:	37	a.m. e.p.m	• •, •			
	Monitori	ng Site ID: <u>355</u>	Cam	nla Tr	n I oan	tion (o a	المامات		- 1-1	re-Mrigurahaamaanaa			P. T. P. S. D. S. T. S.	
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	DOCEMENT I	II: System Test Resul If your system uses o	continuor	uou i is chla	or Syst	ems wno	Ozina :	ontinu	ous Chlorination (	to be comp	leted by	SAME	LER)	
	Ctt	must of tebe	med here	w. Sy	stems v	who do no	ot cont	muous	ily chiorinate may	skip this s	ection.	ntected		
	Storet 50060		ameter		Handar Majarika			SDWA	Method	Re	sults	MRDL	Units	
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Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis, Stats. and ch. NR 809.80. Personally identifiable information on this form will be used for no other purpose. Reference Requirement #22966613.

/100 ML

99741 E\*Colite®

99740 E\*Colite®

/100 ML

DNR Drinking Water Program South Central Region 3911 Fish Hatchery Rd Fitchburg WI 53711

## BACTERIOLOGICAL ANALYSIS

(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)

Section I: System Information (to be completed by Department of Natural Resources/SAMPLER)

Public Water Supply Form Number: 6804

Rèvision:,20240105 Generated: 9/12/2025

/100 ML

 $/100 \, MI$ 

System Name: PINE VALLEY COMMUNITY VILLAGE PWS ID: 15300648 DNR Contact: LAUREN BELZ (608)800-2915 Region: 1 Type: MC System Address: 25951 CIRCLE VIEW DR City: RICHLAND CENTER County: RICHLAND Entry Point ID: WI Unique Well No: Note: System Chlorinates. Sampler: (Leave Blank If You Don't Use These Services) Sampler Contact Info: (Notify DNR Contact of Corrections) Provide information to have results faxed or emailed or to (608)647-2138 change a billing address, if your lab offers these services CHAD WILLIAMSON Fax Number: 25951 CIRCLE VIEW DR Email: RICHLAND CENTER WI 53581 Billing Address: Sample Source: (Location) Sample Type: (Check Only One) X D - Routine Distribution N - New Construction \_\_ W - Well Source C\* - Check: Same location as Positive "D" Sample \_\_ I - Investigation E - Entry Point R\* - Repeat: Within 5 connects of Positive "D" Sample \_\_ W - (Raw.) Water X D - Distribution System A - Additional Routine (month following positive "D") \*IF THE SAMPLE TYPE IS "C" or "R": D" or "A" Positive "D" or "A" Positive Sample Date: \_\_/ Sample ID; Special Instructions: SAMPLES MUST BE ANALYZED WITHIN 30 HOURS OF Collect Sample between: 10/1/2025 and 10/31/2025 COLLECTION. SEE SAMPLING INSTRUCTIONS ON BACK. Section II: Sample Information (to be completed by SAMPLER - ALL ITEMS REQUIRED) Sample Collection Date: 10/ /5/ 25 (mm/dd/yyyy) Time: Address where sample was collected: Mechaniled poun Monitoring Site ID: 553 Sample Tap Location (e.g. kitchen sink): First Initial and Last Name of Sampler: C- Williamson Sampler Phone: Section III: System Test Result Information for Systems Who Use Continuous Chlorination (to be completed by SAMPLER) If your system uses continuous chlorination, the chlorine residual level at the time the sample was collected must be reported below. Systems who do not continuously chlorinate may skip this section Storet SDWA Method MRDL Units Parameter Results CHLORINE TOTAL RESIDUAL FIELD 50060 4.0 MG/L 50064 CHLORINE FREE AVAIL FIELD 4.0 MG/L 50066 COMBINED AVAILABLE CHLORINE MG/L Section IV: Lab Test Results (to be completed by LAB) Lab has 24 hours to electronically report results to DNR per NR 809.80 TOTAL COLIFORM E COLI SDWA SDWA Method Result Description. Method Result Units Storet Description Units Storet '100 MI /100 ML 99069 Colilert® Presence/Absence 99060 | Colilert® Presence/Absence 99190 |Colisure® Presence/Absence /100 MI 98931 Colisure® Presence/Absence /100 MI /100 ML 98929 |Colistre® Quantitray /100 ML 99192 Colisure® Quantitray  $/100 \, \mathrm{ML}$ 98932 |Colifert®-18 Presence/Absence 99189 Colilert®-18 Presence/Absence /100 ML /100 ML 99743 MI Agar /100 ML 99742 MI Agar 99188 Colilert® Quantitray  $/100 \, ML$ 99118 |Colilert® Quantitray  $/100 \, ML$ /100 MI 99191 |Colilert@-18 Quantitray /100 ML 98930 |Colilert®-18 Quantitray

Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory, Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis, Stats, and ch, NR 809.80, Personally identifiable information on this form will be used for no other purpose. Reference Requirement #111713040.

99828 Colitag<sup>TM</sup> 99962 Readycult®

99741 E\*Colite®

/100 ML

/100 MI

/100-ML

LV Labs WW, LLC

99829 Colitag™

99740 E\*Colite®

Readycult®

99961