

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Atlantic County
PWSID Number:	0119002
Accurate as of:	June 30, 2023

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

Contact Name:	Tim Bright
Contact Title:	Sr, Operations Supervisor
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	106
II. Galvanized	<input checked="" type="checkbox"/>	535
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	36,820
V. Non-lead	<input checked="" type="checkbox"/>	4,945

  

Total # of SLs	42406
# of known SLs before replacement activities	76
# of known Unknowns before replacement	0
# of known LSLs	641
# of LSLs to be replaced annually:	64

  

# of LSLs replaced this year:	76
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# of LSLs replaced 07/22/2021-06/30/2022:	9	1%
# of LSLs replaced 07/01/2022-06/30/2023:	76	12%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>85</b>	<b>13%</b>

  

Partial replacements?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes, how many?	7
<b>Optional Question</b>	<b>Yes</b> <b>No</b>
Filter distribution program?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, how many distributed?	

  

# of Unknowns identified 07/22/2021-06/30/2022:	1,296
# of Unknowns identified 07/01/2022-06/30/2023:	2,952
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>4248</b>

**IV. Certifications**

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

_____	June 30, 2023	_____
Tim Bright	Date	Title (if WS Owner)
Water System Owner or Licensed Operator Name		840737
_____	_____	License Number (if LO)
Email	Phone Number	

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

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# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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**I. System Information**

Water System Name:	Belvidere
PWSID Number:	2103001
Accurate as of:	June 30, 2023

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

Contact Name:	Frank Hadley
Contact Title:	Sr, Operations Superintendent
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input type="checkbox"/>	7
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	818
V. Non-lead	<input checked="" type="checkbox"/>	466

  

# of LSLs replaced this year:	46
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Total # of SLs	1291
# of known SLs before replacement activities	46
# of known Unknowns before replacement	0
# of known LSLs	7
# of LSLs to be replaced annually:	1

  

	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Period	# of LSLs replaced	Percentage
# of LSLs replaced 07/22/2021-06/30/2022:	1	14%
# of LSLs replaced 07/01/2022-06/30/2023:	46	657%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>47</b>	<b>671%</b>

  

Period	# of Unknowns identified
# of Unknowns identified 07/22/2021-06/30/2022:	87
# of Unknowns identified 07/01/2022-06/30/2023:	329
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>416</b>

**IV. Certifications**

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

Frank Hadley	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0005007
Email	Phone Number	License Number (if LO)

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

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# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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**I. System Information**

Water System Name:	Bridgeport
PWSID Number:	0809001
Accurate as of:	June 30, 2023

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

Contact Name:	Donna Slack
Contact Title:	Sr. Superintendent, Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input type="checkbox"/>	3
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input type="checkbox"/>	276
V. Non-lead	<input type="checkbox"/>	64

  

Total # of SLs		343
# of known SLs before replacement activities		0
# of known Unknowns before replacement		0
# of known LSLs		3
# of LSLs to be replaced annually:		0

  

# of LSLs replaced this year:	0
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	0	0%
07/01/2022-06/30/2023:	0	0%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	0	0%

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	29
07/01/2022-06/30/2023:	46
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	75

**IV. Certifications**

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

Donna Slack	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		033004
Email	Phone Number	License Number (if LO)

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

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# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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**I. System Information**

Water System Name:	Cape May Court House
PWSID Number:	0506010
Accurate as of:	June 30, 2023

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

Contact Name:	Joe Wisser
Contact Title:	Sr, Operations Supervisor
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	1
II. Galvanized	<input checked="" type="checkbox"/>	37
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	2,338
V. Non-lead	<input checked="" type="checkbox"/>	289

  

# of LSLs replaced this year:	7
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Total # of SLs	2665
# of known SLs before replacement activities	7
# of known Unknowns before replacement	0
# of known LSLs	38
# of LSLs to be replaced annually:	4

  

	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	0	0%
07/01/2022-06/30/2023:	7	18%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>7</b>	<b>18%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	46
07/01/2022-06/30/2023:	209
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>255</b>

**IV. Certifications**

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

Joe Wisser	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		789109
Email	Phone Number	License Number (if LO)

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

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**I. System Information**

Water System Name:	Coastal North
PWSID Number:	1345001
Accurate as of:	June 30, 2023

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

Contact Name:	Joseph Meyer
Contact Title:	Sr, Manager Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	215
II. Galvanized	<input checked="" type="checkbox"/>	2,924
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	107,382
V. Non-lead	<input checked="" type="checkbox"/>	26,294

  

Total # of SLs	136815
# of known SLs before replacement activities	370
# of known Unknowns before replacement	0
# of known LSLs	3139
# of LSLs to be replaced annually:	314

  

# of LSLs replaced this year:	370
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	Yes	No
Partial replacements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, how many?	2	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	73	2%
07/01/2022-06/30/2023:	370	12%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>443</b>	<b>14%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	24,073
07/01/2022-06/30/2023:	0
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>24073</b>

**IV. Certifications**

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

Joseph Meyer	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		490185
Email	Phone Number	License Number (if LO)

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



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# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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**I. System Information**

Water System Name:	Deep Run
PWSID Number:	1523002
Accurate as of:	June 30, 2023

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

Contact Name:	Drew Wilson
Contact Title:	License Operator
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	0
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	40
V. Non-lead	<input checked="" type="checkbox"/>	214

  

Total # of SLs		254
# of known SLs before replacement activities		0
# of known Unknowns before replacement		0
# of known LSLs		0
# of LSLs to be replaced annually:		0

  

# of LSLs replaced this year:	0
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	#DIV/0!
07/22/2021-06/30/2022:	0	#DIV/0!
07/01/2022-06/30/2023:	0	#DIV/0!
07/01/2023-06/30/2024:	0	#DIV/0!
07/01/2024-06/30/2025:	0	#DIV/0!
07/01/2025-06/30/2026:	0	#DIV/0!
07/01/2026-06/30/2027:	0	#DIV/0!
07/01/2027-06/30/2028:	0	#DIV/0!
07/01/2028-06/30/2029:	0	#DIV/0!
07/01/2029-06/30/2030:	0	#DIV/0!
07/01/2030-06/30/2031:	0	#DIV/0!
<b>Total # of service lines replaced:</b>	0	#DIV/0!

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	0
07/01/2022-06/30/2023:	208
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	208

**IV. Certifications**

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

Drew Wilson	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		727703
Email	Phone Number	License Number (if LO)

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

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**I. System Information**

Water System Name:	Egg Harbor City
PWSID Number:	0107001
Accurate as of:	June 30, 2023

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

Contact Name:	Robert Dollard
Contact Title:	Sr, Operations Supervisor
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	3
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	75
V. Non-lead	<input checked="" type="checkbox"/>	1,489

  

Total # of SLs	1567
# of known SLs before replacement activities	0
# of known Unknowns before replacement	0
# of known LSLs	3
# of LSLs to be replaced annually:	0

  

# of LSLs replaced this year:	0
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# of LSLs replaced 07/22/2021-06/30/2022:	0	0%	Partial replacements? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, how many? <u>0</u>
# of LSLs replaced 07/01/2022-06/30/2023:	0	0%	
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%	<b>Optional Question</b> Filter distribution program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, how many distributed?
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%	
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%	
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%	
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%	
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%	
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%	
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%	
<b>Total # of service lines replaced:</b>	<b>0</b>	<b>0%</b>	

  

# of Unknowns identified 07/22/2021-06/30/2022:	4
# of Unknowns identified 07/01/2022-06/30/2023:	0
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>4</b>

**IV. Certifications**

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

Robert Dollard	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		828414
Email	Phone Number	License Number (if LO)

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

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# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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**I. System Information**

Water System Name:	Four Seasons at Chester WTP
PWSID Number:	1407001
Accurate as of:	June 30, 2023

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

Contact Name:	Carlo Ventricelli
Contact Title:	License Operator
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	0
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	120
V. Non-lead	<input checked="" type="checkbox"/>	0

  

# of LSLs replaced this year:	0
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Total # of SLs	120
# of known SLs before replacement activities	0
# of known Unknowns before replacement	0
# of known LSLs	0
# of LSLs to be replaced annually:	0

  

	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

	#DIV/0!
# of LSLs replaced 07/22/2021-06/30/2022:	0
# of LSLs replaced 07/01/2022-06/30/2023:	0
# of LSLs replaced 07/01/2023-06/30/2024:	0
# of LSLs replaced 07/01/2024-06/30/2025:	0
# of LSLs replaced 07/01/2025-06/30/2026:	0
# of LSLs replaced 07/01/2026-06/30/2027:	0
# of LSLs replaced 07/01/2027-06/30/2028:	0
# of LSLs replaced 07/01/2028-06/30/2029:	0
# of LSLs replaced 07/01/2029-06/30/2030:	0
# of LSLs replaced 07/01/2030-06/30/2031:	0
<b>Total # of service lines replaced:</b>	0

  

# of Unknowns identified 07/22/2021-06/30/2022:	4
# of Unknowns identified 07/01/2022-06/30/2023:	0
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	4

**IV. Certifications**

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

Carlo Ventricelli	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		627771
Email	Phone Number	License Number (if LO)

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



**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Frenchtown
PWSID Number:	1011001
Accurate as of:	June 30, 2023

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

Contact Name:	John Barone
Contact Title:	Sr, Supervisor Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	83
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	304
V. Non-lead	<input checked="" type="checkbox"/>	117

  

Total # of SLs	504
# of known SLs before replacement activities	25
# of known Unknowns before replacement	0
# of known LSLs	83
# of LSLs to be replaced annually:	8

  

# of LSLs replaced 07/22/2021-06/30/2022:	0	0%
# of LSLs replaced 07/01/2022-06/30/2023:	25	30%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>25</b>	<b>30%</b>

  

Partial replacements?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, how many?	0
<b>Optional Question</b>	<b>Yes</b> <b>No</b>
Filter distribution program?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, how many distributed?	

  

# of Unknowns identified 07/22/2021-06/30/2022:	0
# of Unknowns identified 07/01/2022-06/30/2023:	23
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>23</b>

**IV. Certifications**

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

John Barone	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		627367
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Harrison
PWSID Number:	0808001
Accurate as of:	June 30, 2023

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

Contact Name:	Thomas Eckel
Contact Title:	Sr. Supervisor, Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input type="checkbox"/>	15
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	3,010
V. Non-lead	<input checked="" type="checkbox"/>	237

  

Total # of SLs		3262
# of known SLs before replacement activities		1
# of known Unknowns before replacement		0
# of known LSLs		15
# of LSLs to be replaced annually:		2

  

# of LSLs replaced this year:	1
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	0	0%
07/01/2022-06/30/2023:	1	7%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>1</b>	<b>7%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	114
07/01/2022-06/30/2023:	40
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>154</b>

**IV. Certifications**

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

Thomas Eckel	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		828322
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Homestead
PWSID Number:	0318002
Accurate as of:	June 30, 2023

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

Contact Name:	Thomas Eckel
Contact Title:	Sr. Supervisor, Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	0
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	1,241
V. Non-lead	<input checked="" type="checkbox"/>	59

  

Total # of SLs		1300
# of known SLs before replacement activities		0
# of known Unknowns before replacement		0
# of known LSLs		0
# of LSLs to be replaced annually:		0

  

# of LSLs replaced this year:	0
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

	Yes	No
# of LSLs replaced 07/22/2021-06/30/2022:	0	#DIV/0!
# of LSLs replaced 07/01/2022-06/30/2023:	0	#DIV/0!
# of LSLs replaced 07/01/2023-06/30/2024:	0	#DIV/0!
# of LSLs replaced 07/01/2024-06/30/2025:	0	#DIV/0!
# of LSLs replaced 07/01/2025-06/30/2026:	0	#DIV/0!
# of LSLs replaced 07/01/2026-06/30/2027:	0	#DIV/0!
# of LSLs replaced 07/01/2027-06/30/2028:	0	#DIV/0!
# of LSLs replaced 07/01/2028-06/30/2029:	0	#DIV/0!
# of LSLs replaced 07/01/2029-06/30/2030:	0	#DIV/0!
# of LSLs replaced 07/01/2030-06/30/2031:	0	#DIV/0!
<b>Total # of service lines replaced:</b>	0	#DIV/0!

  

# of Unknowns identified 07/22/2021-06/30/2022:	29
# of Unknowns identified 07/01/2022-06/30/2023:	19
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	48

**IV. Certifications**

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

Thomas Eckel	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		828322
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	ITC
PWSID Number:	1427017
Accurate as of:	June 30, 2023

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

Contact Name:	Frank Hadley
Contact Title:	Sr, Operations Superintendent
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	0
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	337
V. Non-lead	<input checked="" type="checkbox"/>	9

Total # of SLs		346
# of known SLs before replacement activities		0
# of known Unknowns before replacement		0
# of known LSLs		0
# of LSLs to be replaced annually:		0

# of LSLs replaced this year:	0
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

Period	# of LSLs replaced	#DIV/0!
# of LSLs replaced 07/22/2021-06/30/2022:	0	#DIV/0!
# of LSLs replaced 07/01/2022-06/30/2023:	0	#DIV/0!
# of LSLs replaced 07/01/2023-06/30/2024:	0	#DIV/0!
# of LSLs replaced 07/01/2024-06/30/2025:	0	#DIV/0!
# of LSLs replaced 07/01/2025-06/30/2026:	0	#DIV/0!
# of LSLs replaced 07/01/2026-06/30/2027:	0	#DIV/0!
# of LSLs replaced 07/01/2027-06/30/2028:	0	#DIV/0!
# of LSLs replaced 07/01/2028-06/30/2029:	0	#DIV/0!
# of LSLs replaced 07/01/2029-06/30/2030:	0	#DIV/0!
# of LSLs replaced 07/01/2030-06/30/2031:	0	#DIV/0!
<b>Total # of service lines replaced:</b>	0	#DIV/0!

Period	# of Unknowns identified
# of Unknowns identified 07/22/2021-06/30/2022:	440
# of Unknowns identified 07/01/2022-06/30/2023:	0
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	440

**IV. Certifications**

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

Frank Hadley	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0005007
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Little Falls
PWSID Number:	1605001
Accurate as of:	June 30,2023

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

Contact Name:	Kevin.Nugent
Contact Title:	License Operator
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	7
II. Galvanized	<input checked="" type="checkbox"/>	94
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	3,516
V. Non-lead	<input checked="" type="checkbox"/>	738

  

# of LSLs replaced this year:	49
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Total # of SLs	4355
# of known SLs before replacement activities	49
# of known Unknowns before replacement	0
# of known LSLs	101
# of LSLs to be replaced annually:	10

  

	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>	<b>Yes</b>	<b>No</b>
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

# of LSLs replaced 07/22/2021-06/30/2022:	6	6%
# of LSLs replaced 07/01/2022-06/30/2023:	49	49%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>55</b>	<b>54%</b>

  

# of Unknowns identified 07/22/2021-06/30/2022:	450
# of Unknowns identified 07/01/2022-06/30/2023:	515
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>965</b>

**IV. Certifications**

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

Kevin.Nugent	June 30,2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		27084
Email	Phone Number	License Number (if LO)

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



**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Logan
PWSID Number:	0809002
Accurate as of:	June 30, 2023

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

Contact Name:	Thomas Eckel
Contact Title:	Sr. Supervisor, Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input type="checkbox"/>	11
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input type="checkbox"/>	2,097
V. Non-lead	<input type="checkbox"/>	213

  

Total # of SLs		2321
# of known SLs before replacement activities		1
# of known Unknowns before replacement		0
# of known LSLs		11
# of LSLs to be replaced annually:		1

  

# of LSLs replaced this year:	1
-------------------------------	---

  

	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	0	0%
07/01/2022-06/30/2023:	1	9%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>1</b>	<b>9%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	336
07/01/2022-06/30/2023:	106
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>442</b>

**IV. Certifications**

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

Thomas Eckel	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		828322
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Mount Holly
PWSID Number:	0323001
Accurate as of:	June 30, 2023

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

Contact Name:	John Graham
Contact Title:	Sr, Manager Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	51
II. Galvanized	<input checked="" type="checkbox"/>	408
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	11,576
V. Non-lead	<input checked="" type="checkbox"/>	3,146

  

Total # of SLs		15181
# of known SLs before replacement activities		28
# of known Unknowns before replacement		0
# of known LSLs		459
# of LSLs to be replaced annually:		46

  

# of LSLs replaced this year:	28
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	3	1%
07/01/2022-06/30/2023:	28	6%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>31</b>	<b>7%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	861
07/01/2022-06/30/2023:	966
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>1827</b>

**IV. Certifications**

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

John Graham	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0028321
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	New Egypt
PWSID Number:	1523003
Accurate as of:	June 30, 2023

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

Contact Name:	Drew Wilson
Contact Title:	License Operator
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	11
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	320
V. Non-lead	<input checked="" type="checkbox"/>	430

  

Total # of SLs		761
# of known SLs before replacement activities		0
# of known Unknowns before replacement		0
# of known LSLs		11
# of LSLs to be replaced annually:		1

  

# of LSLs replaced this year:	0
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Period	# of Unknowns
# of Unknowns identified 07/22/2021-06/30/2022:	148
# of Unknowns identified 07/01/2022-06/30/2023:	4
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>152</b>

  

Period	# of LSLs Replaced	%
# of LSLs replaced 07/22/2021-06/30/2022:	0	0%
# of LSLs replaced 07/01/2022-06/30/2023:	0	0%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>0</b>	<b>0%</b>

**IV. Certifications**

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

Drew Wilson	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		727703
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Ocean City
PWSID Number:	0508001
Accurate as of:	June 30, 2023

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

Contact Name:	Tim Green
Contact Title:	Sr, Supervisor Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	16
II. Galvanized	<input checked="" type="checkbox"/>	542
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	9,958
V. Non-lead	<input checked="" type="checkbox"/>	5,126

  

Total # of SLs	15642
# of known SLs before replacement activities	59
# of known Unknowns before replacement	0
# of known LSLs	558
# of LSLs to be replaced annually:	56

  

# of LSLs replaced this year:	59
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	Yes	No
Partial replacements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, how many?	8	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

	Yes	No
# of LSLs replaced 07/22/2021-06/30/2022:	40	7%
# of LSLs replaced 07/01/2022-06/30/2023:	59	11%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>99</b>	<b>18%</b>

  

	Yes	No
# of Unknowns identified 07/22/2021-06/30/2022:	2,087	
# of Unknowns identified 07/01/2022-06/30/2023:	4,249	
# of Unknowns identified 07/01/2023-06/30/2024:	0	
# of Unknowns identified 07/01/2024-06/30/2025:	0	
# of Unknowns identified 07/01/2025-06/30/2026:	0	
# of Unknowns identified 07/01/2026-06/30/2027:	0	
# of Unknowns identified 07/01/2027-06/30/2028:	0	
# of Unknowns identified 07/01/2028-06/30/2029:	0	
# of Unknowns identified 07/01/2029-06/30/2030:	0	
# of Unknowns identified 07/01/2030-06/30/2031:	0	
<b>Total# of Unknowns identified:</b>	<b>6336</b>	

**IV. Certifications**

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

_____	_____	_____
Tim Green	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
_____	_____	787720
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Oldwick
PWSID Number:	1024001
Accurate as of:	June 30, 2023

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

Contact Name:	John Barone
Contact Title:	Sr, Supervisor Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	0
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	71
V. Non-lead	<input checked="" type="checkbox"/>	1

Total # of SLs	72
# of known SLs before replacement activities	0
# of known Unknowns before replacement	0
# of known LSLs	0
# of LSLs to be replaced annually:	0

# of LSLs replaced this year:	0
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# of LSLs replaced 07/22/2021-06/30/2022:	0	#DIV/0!	Partial replacements?	<input type="checkbox"/>	Yes	No
# of LSLs replaced 07/01/2022-06/30/2023:	0	#DIV/0!	If yes, how many?	0		
# of LSLs replaced 07/01/2023-06/30/2024:	0	#DIV/0!	<b>Optional Question</b>	Yes	No	
# of LSLs replaced 07/01/2024-06/30/2025:	0	#DIV/0!	Filter distribution program?	<input type="checkbox"/>	Yes	No
# of LSLs replaced 07/01/2025-06/30/2026:	0	#DIV/0!	If yes, how many distributed?			
# of LSLs replaced 07/01/2026-06/30/2027:	0	#DIV/0!				
# of LSLs replaced 07/01/2027-06/30/2028:	0	#DIV/0!				
# of LSLs replaced 07/01/2028-06/30/2029:	0	#DIV/0!				
# of LSLs replaced 07/01/2029-06/30/2030:	0	#DIV/0!				
# of LSLs replaced 07/01/2030-06/30/2031:	0	#DIV/0!				
Total # of service lines replaced:	0	#DIV/0!				

# of Unknowns identified 07/22/2021-06/30/2022:	2
# of Unknowns identified 07/01/2022-06/30/2023:	7
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
Total# of Unknowns identified:	9

**IV. Certifications**

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

John Barone	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		627367
Email	Phone Number	License Number (if LO)

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



**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Penns Grove
PWSID Number:	1707001
Accurate as of:	June 30, 2023

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

Contact Name:	Thomas Eckel
Contact Title:	Sr. Supervisor, Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	4
II. Galvanized	<input checked="" type="checkbox"/>	67
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	3,083
V. Non-lead	<input checked="" type="checkbox"/>	821

  

Total # of SLs		3975
# of known SLs before replacement activities		1
# of known Unknowns before replacement		0
# of known LSLs		71
# of LSLs to be replaced annually:		7

  

# of LSLs replaced this year:	1
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	Yes	No
Partial replacements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, how many?	1	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	Count	Percentage
# of LSLs replaced 07/22/2021-06/30/2022:	0	0%
# of LSLs replaced 07/01/2022-06/30/2023:	1	1%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>1</b>	<b>1%</b>

  

Year	Count
# of Unknowns identified 07/22/2021-06/30/2022:	258
# of Unknowns identified 07/01/2022-06/30/2023:	373
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>631</b>

**IV. Certifications**

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

Thomas Eckel	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		828322
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Raritan System
PWSID Number:	2004002
Accurate as of:	June 30, 2023

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

Contact Name:	Frank Marascia
Contact Title:	Sr. Manager, Production
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	511
II. Galvanized	<input checked="" type="checkbox"/>	9,834
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	169,567
V. Non-lead	<input checked="" type="checkbox"/>	31,275

  

Total # of SLs	211187
# of known SLs before replacement activities	1,361
# of known Unknowns before replacement	0
# of known LSLs	10345
# of LSLs to be replaced annually:	1035

  

# of LSLs replaced this year:	1,361
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	Yes	No
Partial replacements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, how many?	63	
<b>Optional Question</b>	Yes	No
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	Count	Percentage
# of LSLs replaced 07/22/2021-06/30/2022:	338	3%
# of LSLs replaced 07/01/2022-06/30/2023:	1,361	13%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>1699</b>	<b>16%</b>

  

Year	Count
# of Unknowns identified 07/22/2021-06/30/2022:	12,084
# of Unknowns identified 07/01/2022-06/30/2023:	6,773
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>18857</b>

**IV. Certifications**

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

Frank Marascia	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		517115
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Roxbury
PWSID Number:	1436002
Accurate as of:	June 30, 2023

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

Contact Name:	Frank Hadley
Contact Title:	Sr, Operations Superintendent
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input type="checkbox"/>	0
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	3,618
V. Non-lead	<input checked="" type="checkbox"/>	301
<b>Total # of SLs</b>		<b>3919</b>
<b># of known SLs before replacement activities</b>		<b>0</b>
<b># of known Unknowns before replacement</b>		<b>0</b>
<b># of known LSLs</b>		<b>0</b>
<b># of LSLs to be replaced annually:</b>		<b>0</b>

  

<b># of LSLs replaced this year:</b>	<b>0</b>
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>	<b>Yes</b>	<b>No</b>
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

# of LSLs replaced 07/22/2021-06/30/2022:	1 #DIV/0!
# of LSLs replaced 07/01/2022-06/30/2023:	0 #DIV/0!
# of LSLs replaced 07/01/2023-06/30/2024:	0 #DIV/0!
# of LSLs replaced 07/01/2024-06/30/2025:	0 #DIV/0!
# of LSLs replaced 07/01/2025-06/30/2026:	0 #DIV/0!
# of LSLs replaced 07/01/2026-06/30/2027:	0 #DIV/0!
# of LSLs replaced 07/01/2027-06/30/2028:	0 #DIV/0!
# of LSLs replaced 07/01/2028-06/30/2029:	0 #DIV/0!
# of LSLs replaced 07/01/2029-06/30/2030:	0 #DIV/0!
# of LSLs replaced 07/01/2030-06/30/2031:	0 #DIV/0!
<b>Total # of service lines replaced:</b>	<b>1 #DIV/0!</b>

  

# of Unknowns identified 07/22/2021-06/30/2022:	31
# of Unknowns identified 07/01/2022-06/30/2023:	183
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>214</b>

**IV. Certifications**

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

Frank Hadley	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0005007
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Shorelands
PWSID Number:	1339001
Accurate as of:	June 30, 2023

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

Contact Name:	Joseph Meyer
Contact Title:	Sr, Manager Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input type="checkbox"/>	4
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	10,611
V. Non-lead	<input checked="" type="checkbox"/>	308

  

Total # of SLs	10923
# of known SLs before replacement activities	0
# of known Unknowns before replacement	0
# of known LSLs	4
# of LSLs to be replaced annually:	0

  

# of LSLs replaced this year:	0
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# of LSLs replaced 07/22/2021-06/30/2022:	0	0%
# of LSLs replaced 07/01/2022-06/30/2023:	0	0%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>0</b>	<b>0%</b>

  

Partial replacements?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, how many?	0
<b>Optional Question</b>	<b>Yes</b> <b>No</b>
Filter distribution program?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, how many distributed?	

  

# of Unknowns identified 07/22/2021-06/30/2022:	431
# of Unknowns identified 07/01/2022-06/30/2023:	223
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>654</b>

**IV. Certifications**

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

Joseph Meyer	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		490185
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Short Hills
PWSID Number:	0712001
Accurate as of:	June 30, 2023

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

Contact Name:	Bob Schaefer
Contact Title:	Sr, Director Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	3,582
II. Galvanized	<input checked="" type="checkbox"/>	2,037
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	59,434
V. Non-lead	<input checked="" type="checkbox"/>	13,314

  

Total # of SLs	78367
# of known SLs before replacement activities	1,569
# of known Unknowns before replacement	0
# of known LSLs	5619
# of LSLs to be replaced annually:	562

  

# of LSLs replaced this year:	1,569
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	Yes	No
Partial replacements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, how many?	1	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

	Yes	No
# of LSLs replaced 07/22/2021-06/30/2022:	623	11%
# of LSLs replaced 07/01/2022-06/30/2023:	1,569	28%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>2192</b>	<b>39%</b>

  

	Yes	No
# of Unknowns identified 07/22/2021-06/30/2022:	8,506	
# of Unknowns identified 07/01/2022-06/30/2023:	2,927	
# of Unknowns identified 07/01/2023-06/30/2024:	0	
# of Unknowns identified 07/01/2024-06/30/2025:	0	
# of Unknowns identified 07/01/2025-06/30/2026:	0	
# of Unknowns identified 07/01/2026-06/30/2027:	0	
# of Unknowns identified 07/01/2027-06/30/2028:	0	
# of Unknowns identified 07/01/2028-06/30/2029:	0	
# of Unknowns identified 07/01/2029-06/30/2030:	0	
# of Unknowns identified 07/01/2030-06/30/2031:	0	
<b>Total# of Unknowns identified:</b>	<b>11433</b>	

**IV. Certifications**

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

Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
Bob Schaefer	June 30, 2023	0025705
Email	Phone Number	License Number (if LO)

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



**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Strathmere
PWSID Number:	0511001
Accurate as of:	June 30, 2023

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

Contact Name:	Jacquelyn Weaver
Contact Title:	Sr. Superintendent, Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	39
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	201
V. Non-lead	<input checked="" type="checkbox"/>	162
<b>Total # of SLs</b>		<b>402</b>
<b># of known SLs before replacement activities</b>		<b>6</b>
<b># of known Unknowns before replacement</b>		<b>0</b>
<b># of known LSLs</b>		<b>39</b>
<b># of LSLs to be replaced annually:</b>		<b>4</b>

  

<b># of LSLs replaced this year:</b>	<b>6</b>
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>	<b>Yes</b>	<b>No</b>
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

Period	# of LSLs replaced	%
# of LSLs replaced 07/22/2021-06/30/2022:	0	0%
# of LSLs replaced 07/01/2022-06/30/2023:	6	15%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>6</b>	<b>15%</b>

Period	# of Unknowns identified
# of Unknowns identified 07/22/2021-06/30/2022:	0
# of Unknowns identified 07/01/2022-06/30/2023:	63
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>63</b>

**IV. Certifications**

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

Jacquelyn Weaver	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		280496
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

**I. System Information**

Water System Name:	Sunbury
PWSID Number:	0329006
Accurate as of:	June 30, 2023

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

Contact Name:	Donna Slack
Contact Title:	Sr. Superintendent, Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites																																																																																												
I. Lead	<input checked="" type="checkbox"/>	0																																																																																												
II. Galvanized	<input checked="" type="checkbox"/>	0																																																																																												
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0																																																																																												
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	360																																																																																												
V. Non-lead	<input checked="" type="checkbox"/>	14																																																																																												
Total # of SLs		374																																																																																												
# of LSLs replaced this year:		0																																																																																												
# of known SLs before replacement activities		0																																																																																												
# of known Unknowns before replacement		0																																																																																												
# of known LSLs		0																																																																																												
# of LSLs to be replaced annually:		0																																																																																												
<table border="1"> <tr> <td># of LSLs replaced 07/22/2021-06/30/2022:</td> <td align="center">0</td> <td>#DIV/0!</td> <td>Partial replacements?</td> <td align="center"><input type="checkbox"/></td> <td align="center">Yes</td> <td align="center">No</td> </tr> <tr> <td># of LSLs replaced 07/01/2022-06/30/2023:</td> <td align="center">0</td> <td>#DIV/0!</td> <td>If yes, how many?</td> <td align="center">0</td> <td align="center"><input checked="" type="checkbox"/></td> <td align="center"><input checked="" type="checkbox"/></td> </tr> <tr> <td># of LSLs replaced 07/01/2023-06/30/2024:</td> <td align="center">0</td> <td>#DIV/0!</td> <td><b>Optional Question</b></td> <td align="center">Yes</td> <td align="center">No</td> <td></td> </tr> <tr> <td># of LSLs replaced 07/01/2024-06/30/2025:</td> <td align="center">0</td> <td>#DIV/0!</td> <td>Filter distribution program?</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input checked="" type="checkbox"/></td> <td align="center"><input checked="" type="checkbox"/></td> </tr> <tr> <td># of LSLs replaced 07/01/2025-06/30/2026:</td> <td align="center">0</td> <td>#DIV/0!</td> <td>If yes, how many distributed?</td> <td></td> <td></td> <td></td> </tr> <tr> <td># of LSLs replaced 07/01/2026-06/30/2027:</td> <td align="center">0</td> <td>#DIV/0!</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td># of LSLs replaced 07/01/2027-06/30/2028:</td> <td align="center">0</td> <td>#DIV/0!</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td># of LSLs replaced 07/01/2028-06/30/2029:</td> <td align="center">0</td> <td>#DIV/0!</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td># of LSLs replaced 07/01/2029-06/30/2030:</td> <td align="center">0</td> <td>#DIV/0!</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td># of LSLs replaced 07/01/2030-06/30/2031:</td> <td align="center">0</td> <td>#DIV/0!</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		# of LSLs replaced 07/22/2021-06/30/2022:	0	#DIV/0!	Partial replacements?	<input type="checkbox"/>	Yes	No	# of LSLs replaced 07/01/2022-06/30/2023:	0	#DIV/0!	If yes, how many?	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	# of LSLs replaced 07/01/2023-06/30/2024:	0	#DIV/0!	<b>Optional Question</b>	Yes	No		# of LSLs replaced 07/01/2024-06/30/2025:	0	#DIV/0!	Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	# of LSLs replaced 07/01/2025-06/30/2026:	0	#DIV/0!	If yes, how many distributed?				# of LSLs replaced 07/01/2026-06/30/2027:	0	#DIV/0!					# of LSLs replaced 07/01/2027-06/30/2028:	0	#DIV/0!					# of LSLs replaced 07/01/2028-06/30/2029:	0	#DIV/0!					# of LSLs replaced 07/01/2029-06/30/2030:	0	#DIV/0!					# of LSLs replaced 07/01/2030-06/30/2031:	0	#DIV/0!					<table border="1"> <tr> <td># of Unknowns identified 07/22/2021-06/30/2022:</td> <td align="center">7</td> </tr> <tr> <td># of Unknowns identified 07/01/2022-06/30/2023:</td> <td align="center">35</td> </tr> <tr> <td># of Unknowns identified 07/01/2023-06/30/2024:</td> <td align="center">0</td> </tr> <tr> <td># of Unknowns identified 07/01/2024-06/30/2025:</td> <td align="center">0</td> </tr> <tr> <td># of Unknowns identified 07/01/2025-06/30/2026:</td> <td align="center">0</td> </tr> <tr> <td># of Unknowns identified 07/01/2026-06/30/2027:</td> <td align="center">0</td> </tr> <tr> <td># of Unknowns identified 07/01/2027-06/30/2028:</td> <td align="center">0</td> </tr> <tr> <td># of Unknowns identified 07/01/2028-06/30/2029:</td> <td align="center">0</td> </tr> <tr> <td># of Unknowns identified 07/01/2029-06/30/2030:</td> <td align="center">0</td> </tr> <tr> <td># of Unknowns identified 07/01/2030-06/30/2031:</td> <td align="center">0</td> </tr> <tr> <td>Total# of Unknowns identified:</td> <td align="center">42</td> </tr> </table>	# of Unknowns identified 07/22/2021-06/30/2022:	7	# of Unknowns identified 07/01/2022-06/30/2023:	35	# of Unknowns identified 07/01/2023-06/30/2024:	0	# of Unknowns identified 07/01/2024-06/30/2025:	0	# of Unknowns identified 07/01/2025-06/30/2026:	0	# of Unknowns identified 07/01/2026-06/30/2027:	0	# of Unknowns identified 07/01/2027-06/30/2028:	0	# of Unknowns identified 07/01/2028-06/30/2029:	0	# of Unknowns identified 07/01/2029-06/30/2030:	0	# of Unknowns identified 07/01/2030-06/30/2031:	0	Total# of Unknowns identified:	42
# of LSLs replaced 07/22/2021-06/30/2022:	0	#DIV/0!	Partial replacements?	<input type="checkbox"/>	Yes	No																																																																																								
# of LSLs replaced 07/01/2022-06/30/2023:	0	#DIV/0!	If yes, how many?	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																																																																																								
# of LSLs replaced 07/01/2023-06/30/2024:	0	#DIV/0!	<b>Optional Question</b>	Yes	No																																																																																									
# of LSLs replaced 07/01/2024-06/30/2025:	0	#DIV/0!	Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																																																																																								
# of LSLs replaced 07/01/2025-06/30/2026:	0	#DIV/0!	If yes, how many distributed?																																																																																											
# of LSLs replaced 07/01/2026-06/30/2027:	0	#DIV/0!																																																																																												
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Total# of Unknowns identified:	42																																																																																													
Total # of service lines replaced:		0																																																																																												

**IV. Certifications**

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

Donna Slack	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		033004
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Twin Lakes
PWSID Number:	1803002
Accurate as of:	June 30, 2023

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

Contact Name:	Bob Schaefer
Contact Title:	License Operator
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	1
II. Galvanized	<input checked="" type="checkbox"/>	0
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	78
V. Non-lead	<input checked="" type="checkbox"/>	76
<b>Total # of SLs</b>		<b>155</b>
# of known SLs before replacement activities		0
# of known Unknowns before replacement		0
# of known LSLs		1
# of LSLs to be replaced annually:		0

  

# of LSLs replaced this year:	0
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	0	0%
07/01/2022-06/30/2023:	0	0%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>0</b>	<b>0%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	32
07/01/2022-06/30/2023:	0
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>32</b>

**IV. Certifications**

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

Bob Schaefer	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0025705
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Union Beach
PWSID Number:	1350001
Accurate as of:	June 30,2023

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

Contact Name:	Joseph Meyer
Contact Title:	Sr, Manager Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input type="checkbox"/>	1
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	1,935
V. Non-lead	<input checked="" type="checkbox"/>	291

  

Total # of SLs	2227
# of known SLs before replacement activities	2
# of known Unknowns before replacement	0
# of known LSLs	1
# of LSLs to be replaced annually:	0

  

# of LSLs replaced this year:	2
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	0	0%
07/01/2022-06/30/2023:	2	200%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>2</b>	<b>200%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	77
07/01/2022-06/30/2023:	35
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>112</b>

**IV. Certifications**

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

Joseph Meyer	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		490185
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Vincentown
PWSID Number:	0333004
Accurate as of:	June 30, 2023

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

Contact Name:	Donna Slack
Contact Title:	Sr. Superintendent, Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	1
II. Galvanized	<input checked="" type="checkbox"/>	13
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	193
V. Non-lead	<input checked="" type="checkbox"/>	25
<b>Total # of SLs</b>		<b>232</b>
# of known SLs before replacement activities		0
# of known Unknowns before replacement		0
# of known LSLs		14
# of LSLs to be replaced annually:		1

  

# of LSLs replaced this year:	0
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# of LSLs replaced 07/22/2021-06/30/2022:	0	0%	Partial replacements? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, how many? <input type="text" value="0"/>
# of LSLs replaced 07/01/2022-06/30/2023:	0	0%	
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%	<b>Optional Question</b> Filter distribution program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, how many distributed?
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%	
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%	
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%	
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%	
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%	
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%	
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%	
<b>Total # of service lines replaced:</b>	<b>0</b>	<b>0%</b>	

  

# of Unknowns identified 07/22/2021-06/30/2022:	6
# of Unknowns identified 07/01/2022-06/30/2023:	27
# of Unknowns identified 07/01/2023-06/30/2024:	0
# of Unknowns identified 07/01/2024-06/30/2025:	0
# of Unknowns identified 07/01/2025-06/30/2026:	0
# of Unknowns identified 07/01/2026-06/30/2027:	0
# of Unknowns identified 07/01/2027-06/30/2028:	0
# of Unknowns identified 07/01/2028-06/30/2029:	0
# of Unknowns identified 07/01/2029-06/30/2030:	0
# of Unknowns identified 07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>33</b>

**IV. Certifications**

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

Donna Slack	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0333004
Email	Phone Number	License Number (if LO)

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



**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Washington / Oxford
PWSID Number:	2121001
Accurate as of:	June 30, 2023

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

Contact Name:	Frank Hadley
Contact Title:	Sr, Operations Superintendent
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	168
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	3,411
V. Non-lead	<input checked="" type="checkbox"/>	1,262

  

Total # of SLs	4841
# of known SLs before replacement activities	107
# of known Unknowns before replacement	0
# of known LSLs	168
# of LSLs to be replaced annually:	17

  

# of LSLs replaced this year:	107
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	Percentage
07/22/2021-06/30/2022:	20	12%
07/01/2022-06/30/2023:	107	64%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>127</b>	<b>76%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	656
07/01/2022-06/30/2023:	613
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>1269</b>

**IV. Certifications**

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

Frank Hadley	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0005007
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	West Jersey
PWSID Number:	1427009
Accurate as of:	June 30, 2023

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

Contact Name:	Frank Hadley
Contact Title:	Sr, Operations Superintendent
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input type="checkbox"/>	0
II. Galvanized	<input checked="" type="checkbox"/>	43
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	55
V. Non-lead	<input checked="" type="checkbox"/>	121

  

Total # of SLs	219
# of known SLs before replacement activities	22
# of known Unknowns before replacement	0
# of known LSLs	43
# of LSLs to be replaced annually:	4

  

# of LSLs replaced this year:	22
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	Yes	No
Partial replacements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many?	0	
<b>Optional Question</b>		
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

  

Year	# of LSLs replaced	%
07/22/2021-06/30/2022:	0	0%
07/01/2022-06/30/2023:	22	51%
07/01/2023-06/30/2024:	0	0%
07/01/2024-06/30/2025:	0	0%
07/01/2025-06/30/2026:	0	0%
07/01/2026-06/30/2027:	0	0%
07/01/2027-06/30/2028:	0	0%
07/01/2028-06/30/2029:	0	0%
07/01/2029-06/30/2030:	0	0%
07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>22</b>	<b>51%</b>

  

Year	# of Unknowns identified
07/22/2021-06/30/2022:	416
07/01/2022-06/30/2023:	5
07/01/2023-06/30/2024:	0
07/01/2024-06/30/2025:	0
07/01/2025-06/30/2026:	0
07/01/2026-06/30/2027:	0
07/01/2027-06/30/2028:	0
07/01/2028-06/30/2029:	0
07/01/2029-06/30/2030:	0
07/01/2030-06/30/2031:	0
<b>Total# of Unknowns identified:</b>	<b>421</b>

**IV. Certifications**

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

Frank Hadley	June 30, 2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0005007
Email	Phone Number	License Number (if LO)

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

**Annual Lead Service Line Inventory Report**  
New Jersey Department of Environmental Protection  
Division of Water Supply and Geoscience - Water System Operations Element  
[watersupply@dep.nj.gov](mailto:watersupply@dep.nj.gov)



# of replacements # of Unknowns identified 07/22/2021-06/30/2022:

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

**I. System Information**

Water System Name:	Western
PWSID Number:	0327001
Accurate as of:	June 30,2023

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

Contact Name:	John Graham
Contact Title:	Sr, Manager Field Operations
Contact Phone:	
Contact Email:	

**III. Inventory Information**

Owner of Service Lines:  System  Property Owner  Both

	Selection	Number of sites
I. Lead	<input checked="" type="checkbox"/>	95
II. Galvanized	<input checked="" type="checkbox"/>	2,633
III. Lead gooseneck, pigtail, or connector	<input type="checkbox"/>	0
IV. Lead Status Unknown	<input checked="" type="checkbox"/>	79,191
V. Non-lead	<input checked="" type="checkbox"/>	20,042
<b>Total # of SLs</b>		<b>101961</b>
<b># of known SLs before replacement activities</b>		<b>157</b>
<b># of known Unknowns before replacement</b>		<b>0</b>
<b># of known LSLs</b>		<b>2728</b>
<b># of LSLs to be replaced annually:</b>		<b>273</b>
<b># of Unknowns identified 07/22/2021-06/30/2022:</b>		<b>19,837</b>
<b># of Unknowns identified 07/01/2022-06/30/2023:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2023-06/30/2024:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2024-06/30/2025:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2025-06/30/2026:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2026-06/30/2027:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2027-06/30/2028:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2028-06/30/2029:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2029-06/30/2030:</b>		<b>0</b>
<b># of Unknowns identified 07/01/2030-06/30/2031:</b>		<b>0</b>
<b>Total# of Unknowns identified:</b>		<b>19837</b>

  

<b># of LSLs replaced this year:</b>	<b>157</b>
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# of LSLs replaced 07/22/2021-06/30/2022:	17	1%
# of LSLs replaced 07/01/2022-06/30/2023:	157	6%
# of LSLs replaced 07/01/2023-06/30/2024:	0	0%
# of LSLs replaced 07/01/2024-06/30/2025:	0	0%
# of LSLs replaced 07/01/2025-06/30/2026:	0	0%
# of LSLs replaced 07/01/2026-06/30/2027:	0	0%
# of LSLs replaced 07/01/2027-06/30/2028:	0	0%
# of LSLs replaced 07/01/2028-06/30/2029:	0	0%
# of LSLs replaced 07/01/2029-06/30/2030:	0	0%
# of LSLs replaced 07/01/2030-06/30/2031:	0	0%
<b>Total # of service lines replaced:</b>	<b>174</b>	<b>6%</b>

  

Partial replacements?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, how many?	4	
<b>Optional Question</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Filter distribution program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, how many distributed?		

**IV. Certifications**

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

John Graham	June 30,2023	
Water System Owner or Licensed Operator Name	Date	Title (if WS Owner)
		0028321
Email	Phone Number	License Number (if LO)

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