

Water System Risk Assessment – Conduct seasonally and any time there is a change made to the system or a situation occurs that could introduce an opportunity to contaminate the system

Source of Water: Surface / Ground / Municipal / Other _____

Crop Consumption: Rarely Consumed Raw (RCR) / Generally Consumed Raw

Method(s) of application: Foliar (contacts edible crop) / Non-foliar (does not contact edible crop) Describe: _____

Date of risk assessment: _____

Reason for assessment: Seasonal / System Change / Event Based If due to system change or event, describe _____

Assessment completed by: _____

Is a hazard identified?			
Production Component	If No, justify reasoning. If Yes, describe potential hazard(s) identified in water system	Describe the associated risk mitigation strategies	Are any risks newly identified since the last assessment? If so, describe likely root cause or other factor leading to change.
<p>Water Application</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>N/A <input type="checkbox"/></p>			
<p>Water Distribution System</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>N/A <input type="checkbox"/></p>			

Production Component	If No, justify reasoning. If Yes, describe potential hazard(s) identified in water system	Describe the associated risk mitigation strategies	Are any risks newly identified since the last assessment? If so, describe likely root cause or other factor leading to change.
<i>Animals and Animal Manure</i> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			
<i>Domestic Waste/Sewage</i> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			
<i>Solid/Hazardous Materials</i> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			

Production Component	If No, justify reasoning. If Yes, describe potential hazard(s) identified in water system	Describe the associated risk mitigation strategies	Are any risks newly identified since the last assessment? If so, describe likely root cause or other factor leading to change.
Environmental Factors Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			
History of Water Source Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			
Other Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			