



# Official Email Address and Emergency Contact List

(For Boards of Health)

## I. Instructions

Please submit your BOH **Official Email Address & Emergency Contact List** to MassDEP at the address below. Your official email address should be the address where you wish to receive official MassDEP/DWP information e.g., copies of sanitary surveys, etc. Emergency contacts should be prioritized in the order that you want to be notified by MassDEP staff in case of an emergency. Contact #1 should contain the name and contact information of the BOH person that you want to have contacted first in an emergency; if Contact #1 cannot be reached then we will attempt to contact the person identified as Contact #2; and so on.

Please submit your Official Email Address & Emergency Contact List or any subsequent changes to MassDEP Drinking Water Program; 1 Winter Street - 5<sup>th</sup> floor; Boston, MA 02108; Attn: BOH Emergency Contact. You may also respond by email to [Program.Director-DWP@mass.gov](mailto:Program.Director-DWP@mass.gov), Subject: BOH Official Email Address and Emergency Contact.

## II. Board Information

City/Town: \_\_\_\_\_

Board Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City/Town: \_\_\_\_\_

State and Zip: \_\_\_\_\_

## II. Official BOH Email Address for Copies of Drinking Water Program Correspondence

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

## III. BOH Emergency Contacts

1.	Name: _____	Title: _____
	Work Phone: _____	Evening or Cell Phone: _____
	Work Email: _____	Evening Email: _____
2.	Name: _____	Title: _____
	Work Phone: _____	Evening or Cell Phone: _____
	Work Email: _____	Evening Email: _____
3.	Name: _____	Title: _____
	Work Phone: _____	Evening or Cell Phone: _____
	Work Email: _____	Evening Email: _____
4.	Name: _____	Title: _____
	Work Phone: _____	Evening or Cell Phone: _____
	Work Email: _____	Evening Email: _____