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| **PWS Certification- Cybersecurity Requirements** | |
| *I certify, under penalty of law, that a cybersecurity assessment has been completed for the Grantee (PWS) Cybersecurity Assessment Performed by*  *EPA ,*  *CISA,*  *Self- Assessment, others* Cybersecurity Assessment Report: Date   ***or*** *that the Grantee has registered with EPA for a free assessment or that the Grantee will perform a self-assessment within 30 days. MassDEP/DWP strongly encourages PWS to complete a free assessment through* [*EPA's Water Sector Cybersecurity Evaluation Program*](https://www.epa.gov/waterresilience/forms/epas-water-sector-cybersecurity-evaluation-program)*.* | |
| Authorized Representative Full Name **\*** | Title **\*** |
| Signature **\*** | Date **\*** |