*Attention Public Water Systems: Please adapt this form for your own use. Replace green sections as indicated. An electronic copy of this form is located at the MassDEP website at* [*https://www.mass.gov/lists/lead-copper-forms-templates*](https://www.mass.gov/lists/lead-copper-forms-templates)

# PWOGRAM RANPLASMAN LIY SÈVIS PLON

Vil/Vilaj: [City/Town]

Non PWS: [PWS Name]

# ID PWS: [PWS ID#]

# REZILTA TÈS PLON ANWO NIVO ENTÈVANSYON AN

Dat: [DATE]

ADRÈS: [Address]

NON: [Name] No. TELEFÒN. [Phone Number]

Chè pwopriyetè kay:

Kòm ou konnen, nan dat [DATE the portion of lead service line owned by city/town was replaced] nou te ranplase pòsyon liy sèvis plon vil la/vilaj la posede a, epi nan dat [DATE PWS took a water sample within the lead service line to test for lead level after the replacement] nou te pran yon echantiyon dlo nan liy sèvis plon an pou teste nivo plon apre ranplasman an.

Rezilta plon nan dlo a nan liy sèvis plon w lan ki pasyèlman ranplase a se [lead result in water at homeowner’s partially replaced lead service line, in ppm] pati pou chak milyon (ppm), ki pi woa Limit Entèvansyon pou Plon ak Règleman Kwiv Plon nan 0.015 ppm.

Jan nou te konseye w nan Premye ak Dezyèm Avi Pwogram Ranplasman Liy Sèvis Plon nou an, pòsyon liy sèvis plon ou te chwazi pa ranplase a ap kontinye yon sous plon ki ka filtre si dlo a pa sèvi pandan plis pase sis èdtan. An reyalite, ranplasman pasyèl la gendwa gen yon ogmantasyon tanporè nivo yo.

Vil/Vilaj la ak [PWS Name] PWS rekòmande konsèy sa yo pou kenbe tout plon posib deyò dlo ou bwè a:

* **Sa ki pi enpòtan -** Fè dlo a koule nan tiyo a jiskaske li frèt anvan w itilize l. Dlo nan tiyo nan lari a pa gen plon.
* Pa janm itilize dlo cho nan wobinèt la pou bwè oswa pou kwit manje espesyalman lè w ap fè lèt pou ti bebe.
* Pa janm bouyi dlo pou retire plon. Dlo ki fè anpil tan ap bouyi ka rann plon an plis konsantre, epi
* Ranplase rès liy sèvis plon ou genyen an.

Si w gen kesyon konsènan plon nan dlo pou bwè oswa rezilta echantiyon plon ou, tanpri pa ezite kontakte [NAME of individual to contact with questions regarding lead in drinking water or the lead sampling result] nan [contact PHONE number or EMAIL address] oswa *Sipèentandan Dlo* nan [Water Superintendent contact PHONE or EMAIL address].

[Name and signature of either Town Manager or DPW Director]

Responsab Minisipal Direktè DPW