

Massachusetts Department of Environmental Protection Drinking Water Program **Public Notification**

CERTIFICATION

Make sure to send your regional office of the DEP Drinking Water Program and local board of health a copy of each type of notice and a certification that you have met all the public notice requirements within ten days after issuing the notice (310 CMR 22.15(3)(b)). When you certify, you are also stating that you will meet future requirements for notifying all new billing units or new customers of the violation or situation as specified by MassDEP.

| PWS ID | City/Town: | | |
|--|----------------|------------------------------|---------------|
| PWS Name: | | Community | Non-community |
| Describe the violation or situation specified by MassDEP: | | | |
| Occurring on: Date(s) of violatior | n or situation | NON Number If applicable: | |
| The public water system indicated above hereby affirms that public notice has been provided to consumers in accordance with 310 CMR 22.16 including: delivery, content, format requirements, notification deadlines and that the public water system will meet future requirements for notifying all new billing units or new customers of the violation or situation as specified by MassDEP. | | | |
| Consultation with MassDEP on date | | | |
| Notice distributed by on method date AND | | | |
| Notice distributed by method | on d date | | |
| I certify under penalty of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best of my knowledge and belief. | | | |
| date name | | | |
| Signature of owner or operator | | | |
| | | | |

Rev. March 2019

Western Regional Office, 436 Dwight St., Springfield, MA 01103 Central Regional Office, 8 New Bond St., Worcester, MA 01606 Northeast Regional Office, 205B Lowell St. Wilmington, MA 01887 Southeast Regional Office 20 Riverside Dr., Lakeville, MA 02347 Boston – <u>Program.Director-DWP@mass.gov</u>