Public Notification Certification Form

** This form and a copy of your Notice to the Public must be submitted to the State within 10 days of notifying your customers.**

Water System Name:			PWS ID#:			
Contaminant Group:			Contaminant:			
	lation Tier: (Check appropriate boolation Type: (Check appropriate boolation)	ox)			☐ Tier 3 CL ☐ Monitoring echnique ☐ Other:	
Violation Awareness Date:					Cennique	
(Note : Violation Awareness Dates are as follows: For Fecal/ <i>E.coli</i> MCL = the date the analysis was completed. For all other MCL, MRDL and SMCL violations = within 2 days of the completion of analytical results. For Monitoring and Reporting violations = the date of the violation letter from the State. For Treatment Technique and Other violations, see information in violation letter.)						
Consultation with the State:		(Required for Tier 1)			(Date)	
Notice distributed by: Repeat Notice distributed by:		(Method of Distribution)			(Date distributed)	
		(Method of Distribution)			(Date distributed)	
a c day	Date violation occurred. Potential adverse health risks, using standard language provided in the rule. The population at risk, including sub-populations particularly vulnerable if exposed. Whether alternate water supply should be used. What action consumers should take, including when to seek medical help, if known. What the system is doing to correct the violation or situation.					
The public water system named above hereby affirms that public notification has been provided to its consumers in accordance with all delivery, content, format, and deadline requirements specified in 15A NCAC 18C .1523.						
Ow	Owner/Operator: (Signature) (Print Name)					
Date of Certification:						