Public Health Division

Drinking Water Services

**Lead, GRR, or Unknown Service Line**

**Certification of Notice to Individual Consumers**

Water System Name:

PWS ID No: 41

Date service line inventory was submitted to DWS:

Date(s) notices were sent or provided to consumers:

[ ]  I provided the notice using the [EPA template notices](https://www.epa.gov/region8-waterops/notification-known-or-potential-service-line-containing-lead).

[ ]  I provided different but equivalent notices. Describe:

**Delivery Method**

[ ]  US Postal Service mail

[ ]  Electronic mail

[ ]  Multiple copies delivered to single bill addresses serving several persons, such as apartments, businesses, and large private employers

[ ]  Other methods. Describe:

I hereby certify that a consumer notice of Lead, Galvanized Requiring Replacement (GRR), or Unknown service line has been provided to consumers at each specific residence or facility served by the service line.

**Certified by**

Name:       Title:

Email address:       Phone number:

Date:

**Return this form to**

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| --- | --- |
| Drinking Water ServicesPO Box 14450Portland, OR  97293-0450 | E-mail: dwp.dmce@odhsoha.oregon.govFax: 971-673-0694 |