**LCRR Service Line Inventory PUBLIC ACCESSIBILITY DOCUMENTATION**

This form is intended to help water systems comply with the public accessibility requirements of the federal 2021 Lead and Copper Rule Revisions (LCRR) 40 CFR § 141.90 due by **October 16, 2024**. This form can be used to document that all public accessibility requirements have been met. **Fill in the editable fields on the following pages and submit this form along with your initial inventory to the DNR.** **Attach additional pages if necessary.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **CERTIFICATION (Required)** | | | | | | | |
| PWS Name: | | Click or tap here to enter text. | | | | | |
| PWSID: | | Click or tap here to enter text. | | | | | |
| I hereby certify that the information entered in this form is complete and accurate to the best of my knowledge. | | | | | | | |
| Print and sign form, or type “email” if submitting electronically.[[1]](#footnote-1) | | | | | |  | Click or tap to enter a date. |
| Signature of Responsible Official2 | | | | | |  | Date |
| Click or tap here to enter text. | | | | | |  | Click or tap here to enter text. |
| Printed Name | | | | | |  | Title |
|  | | | | | | | |
| **PUBLIC ACCESSIBILITY REQUIREMENTS** | | | | | | | |
| 1. | Does ***every lead and galvanized requiring replacement service line*** have a location identifier? (e.g., address, block, intersection, landmark, etc.) | | | | | | |
|  | Yes  No | | Not Applicable | | | | |
|  | *Note: You must be able to answer yes to meet federal requirements. If you cannot answer yes, add a locational identifier to every lead and galvanized requiring replacement service line in your inventory before submitting to the department.* | | | | | | |
|  | **Select the type(s) of locational identifier(s) used for your service line inventory.** | | | | | | |
|  | Address  Street  Block  Intersections | | | | Landmark  GPS Coordinates  Other | | |
|  | If you selected other, please describe: Click or tap here to enter text. | | | | | | |
|  | If you used more than one type of locational identifier in your inventory, *Select the primary type of location identifier used.* | | | | | | |
| **PUBLIC ACCESSIBILITY REQUIREMENTS** *(continued)* | | | | | | | |
| 3. | What format did you use to make your service line inventory publicly accessible? Select all that apply | | | | | | |
|  | Interactive (electronic) map  Static Map | | | Spreadsheet or other electronic tabular data  Static tabular data  Other | | | |
|  | If you selected “other”, please describe:Click or tap here to enter text. | | | | | | |
| 4. | Please briefly describe how you shared your inventory with the public. | | | | | | |
|  | Posted online  Posted in water system office  Emailed all customers  Hand delivered to all customers | | | Available upon request in water system office  Included a copy of the inventory in every water bill  Other | | | |
|  | If you selected “other”, please describe:Click or tap here to enter text. | | | | | | |
| 5. | Does your system serve > 50,000 people? *Please note that if your system serves more than 50,000 people, you* ***must*** *provide the inventory online.* | | | | | | |
|  | Yes  No | | | | | | |

1. In lieu of a signature, an electronic copy of the completed form can be emailed to your DNR Representative if:

   * it is attached to an email that comes directly from the person certifying the form; and
   * the email includes the signature block (name, title, affiliation, phone) of the person certifying the form*.*

   [↑](#footnote-ref-1)