CERTIFICATION OF CONSUMER NOTIFICATION OF LEAD/COPPER RESULTS FORM

WISCONSIN DEPARTMENT OF NATURAL RESOURCES		
Return this form to your District DNR Office		
1. PWS Information		
PWS Name		
City /Town The public water system (PWS) named above hereby certifies that individual lead and copper tap results have been		
provided to the persons served by the public wa		
collected in compliance with ch. NR 809.547(4)	(a).	
COMPLIANCE MONITORING PERIOD:		
COMI LIANGE MONITORING I ERIOD.	Start Date TO	End Date
NUMBER OF SITES SAMPLED:	DATE PWS RECEIVED RESULTS FROM LAB:	 Date
2. Consumer Delivery Methods - Based	on Type of Public Water System	
For Community Water Systems (choose a. or b.)	1	
□ a. My system notified consumers by U.S. Mail.□ b. My system notified consumers by hand/direct delivery.		
		Date Completed
		Date Completed
For Non-Transient Non-Community Water Syste	ems (choose a. or b.)	
a. My system posted within the facility in which the	he samples were collected and the results will	<u> </u>
remain posted until the next lead and copper results are reported.		Date Completed
b. My system notified consumers by hand/direct delivery.		Date Completed
3. Consumer Delivery Requirements		
The water system named above certifies that al Rule monitoring and compliance requirements v		
Nule monitoring and compliance requirements to	within 30-days of receiving the test results i	nom the laboratory.
☐ Individual lead tap results from lead and copper	tap water monitoring.	
☐ An explanation of the health effects of lead with	steps that consumers can take to reduce exp	osure to lead in drinking
water. Contact information for your water system.		
☐ The action level for lead and the maximum contaminant level goal, and the definitions of these two terms from s. NR 809.833		
(2).		
4. PWS Certification Requirements		
Sent a copy of this completed Certification Form to the address, email, or fax above within 90-days following the end of the		
monitoring period specified in 1. above. (per NI Attached to this Certification Form an example as presented to consumers.		ead and Copper Results Form
Certified by:		
a		
(Name, Title) (Date)		

(Phone) (E-mail address)