

CERTIFICATION

(Complete this certification form and forward it to the Maine Drinking Water Program.)

Public Water System Name:

PWSID Number: _____

Monitoring Period: _____

I _____ hereby certify and attest that I have notified consumers about their individual lead water sample results in accordance with the delivery, content, format requirements, and deadlines as specified in 40 CFR §141.85(d).

Notices were distributed by _____ on _____
using _____.

Lead results were received from _____ on _____

(signature of owner/operator)

(date)