

CCR CERTIFICATION - FORMAT FOR SYSTEMS WITH MAILING WAIVERS

*Complete only the sections that apply to the method of notification to your customers.
Fill in completely : CWS Name, PWS ID#, method of notification, and certified by.*

CWS NAME; _____

PWS ID#: _____

I confirm that the Consumer Confidence Report (CCR) has been distributed to customers or published with appropriate notices of availability and that the information is correct and consistent with the compliance monitoring data previously submitted to the primacy agency.

SYSTEMS SERVING 501 to 10,000 PERSONS [e.g., DID NOT MAIL, USED NEWS PAPER(S)]. **Must complete both parts of this section.**

____ Published the CCR in the local newspaper(s). **ATTACH A COPY OF THE NEWSPAPER NOTICE(S) TO THIS FORM.** List the newspaper(s) and dates of publication below.

____ Informed customers that the CCR would not be mailed. [List method(s) below. This is usually done by a disclaimer at the bottom of the newspaper notification(s). e.g., “This Consumer Confidence Report will not be mailed to you.”]

OR

SYSTEMS SERVING 501 to 10,000 PERSONS (e.g., MAILED CCR, DIRECT DELIVERY, PLACED COMPLETE CCR WITH/ON WATER BILL, OR OTHER).

____ CCR was distributed by mail, direct delivery or other methods. [Specify which method(s) was used].

____ CCR was distributed by e-mail and/or a dedicated URL link

Certified By: Name (Print): _____

Title: _____

Phone # _____ Date: _____