## NOTICE TO WATER SYSTEM USERS

# QUARTERLY NITRATE MONITORING VIOLATION FORM

*We, Water System, I.D. , located in County are required to monitor your drinking water for specific contaminants on a regular basis. Results of regular monitoring are an indicator of whether or not your drinking water meets health standards. We are required to monitor for nitrates on a quarterly basis. We have failed to meet the monitoring requirements for nitrate for the \_\_\_\_\_ quarter(s) of \_\_\_\_\_\_\_ (year). We cannot be sure of the quality of your drinking water during that time.* At this time:

* No action is required by the users.
* Our current quarterly nitrate samples have been collected.
* Samples will be collected in the future as required.
* Other information for customers:

For more information, please contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at ( )\_\_\_-\_\_\_\_\_ or at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 (owner or operator) (phone number) (address)

*Please share this information with people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses.) You can do this by posting this notice in a public place or distributing copies by hand or mail.*

This notice is sent to you by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Water System on \_\_/\_\_/\_\_

|  |
| --- |
| **Quarterly Nitrate Monitoring Public Notice Certification Form**(This section to be completed by the Water System. Signature below indicates notice contained all required elements.)**Complete the following items (check all that apply):** € Notice mailed to all water customers on \_\_\_\_ / \_\_\_\_/\_\_\_\_ € Notice hand-delivered to all water customers on \_\_\_ / \_\_\_ /\_\_\_ € Notice published in newspaper (attach copy) * Notice posted at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_ / \_\_\_ /\_\_\_\_

(***By Department Approval Only***) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of owner or operator Position Date |
| ***Send copy of completed notification and certification to:***David Sternberg, Water Quality Compliance Programs CoordinatorOffice of Drinking WaterPO Box 47822Olympia, WA 98504-7822FAX 360-236-2252 |

For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).