Community Water System Name: ________________________

PWS I.D. No: ________ For calendar year: ________

The community water system named above hereby confirms that its Consumer Confidence Report has been distributed to customers (and appropriate notices of availability have been given). Further, the system certifies that the information contained in the report is correct and consistent with the compliance monitoring data previously submitted to the primacy agency.

CCR Certified by – Name: _________________________________
Title: ____________________ Phone No: _____________ Date CCR certified: ___________
Date CCR distributed to customers: ____________________

CCR Delivery Certification: (check all items below that apply)

☐ Paper CCR was distributed to each customer by mail or other direct delivery method.

☐ Electronic delivery. Check box below and describe how customers may request a paper copy:

☐ Notification (☐ mail or ☐ email-check all that apply) that CCR is available on website. Specify URL (web address):

☐ CCR sent as an attachment to email (e.g. portable document format-PDF)

☐ CCR sent as an embedded image in body of email

☐ “Good faith” efforts were used to reach non-bill paying consumers. Those efforts may include one or more of the following methods, as recommended by OHA-DWS:

☐ posting the CCR on a publicly-accessible Internet site at www._________________________(required for systems serving at least 100,000 persons)

☐ mailing the CCR to postal patrons within the service area

☐ advertising availability of the CCR in news media

☐ publication of CCR in local newspaper

☐ posting the CCR in public places (locations: ________________________)

☐ delivery of multiple copies to single bill addresses serving several people such as: apartments, businesses, and large private employers

☐ delivery to community organizations

☐ electronic newsletter or listserv, or notice of availability via social media outlets

Mail form to: OHA-Drinking Water Services
P.O. Box 14350
Portland, OR 97293-0350

Fax form to: (971) 673-0694

Email form to: dwp.dmce@state.or.us

* (If the CCR has been distributed, it is recommended that this form be sent to Drinking Water Services at the same time a copy of the CCR is sent to the program; but by rule, the certification form is due no later than Oct 1 annually.)