Kate Brown, Governor



Application for <u>Waiver from Construction Standards</u> for Public Water Systems

Water System Name		PWS ID
Project or Facility		County
Need for waiver identified: W	ater System Surve an Review #	by Date of Survey
Construction standard requested t	to be waived: OAF	R 333-061-0050
As provided under OAR 333-061 construction standards prescribed	by these rules:	, ,
		f the Department that strict compliance with ractical due to special conditions or causes;
	_	est of the application of uniform
provide adequate protectio	on to the health and	n, in the opinion of the Department, will a safety of the public including the ability to eximum contaminant levels listed in rule 333-
Describe situation that conflicts w	vith the standard.	
Describe why meeting the standar	rd is highly burder	nsome or impractical.
Describe proposed alternate meas safety.	sure that provide a	dequate protection to public health and
		Attach plans of proposed waiver request or additional supporting information and • Email your regulator; or • Email dws.planreview@dhsoha.state.or.us; or • Mail:
Signature	Date	Oregon Health Authority
		Drinking Water Services #640
Name Address		PO Box 14450 Portland, OR 97293-0450
City/State/Zip		Fortiand, OK 97293-0430
Telephone Number		
Comments:		
Attachments:		

OHA Use Only			
Waiver ID			
Entered into waiver database			
Plan Review Coordinator's notes:			
After due consideration the above requested waiver from the construction standards of OAR 333-061-0050 is hereby:			
Approved Comments:			
☐ Denied			
Drinking Water Regional Manager Signature Oregon Health Authority Da	ite		
Waiver database updated			