

Annual Water Quality Report Certification Form

Water System Name: _____

Public Water Supply ID #: _____

The community water system named above hereby confirms that its Annual Water Quality Report (AWQR) 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 health department.

Certified by: Name: _____

Title: _____

Phone #: _____ Date: _____

Please indicate how your report was distributed to your customers:

- AWQR was distributed to bill-paying customers by mail.
- AWQR was distributed by other direct delivery method(s) (check all that apply)
 - Hand delivered.
 - Published in local paper (i.e., *Penny Saver*) that was directly delivered or mailed to all bill-paying customers.
 - Published in local municipal newsletter that was directly delivered or mailed.
 - Mailed a notification that AWQR is available on a public website via a direct URL
 - Emailed with a message containing a direct URL link to the AWQR
 - Emailed with AWQR sent as an attachment to the email
 - Emailed with AWQR sent as an embedded image in the email
 - Additional electronic delivery that meets “otherwise directly deliver” requirement
 - Other (please specify) _____
- System does not have bill-paying customers.
- For systems serving at least 100,000 persons:* in addition to direct delivery to bill-paying customer the AWQR was posted on a publicly-accessible website at [www._____](#)

Please indicate what “Good Faith” efforts were used to reach non-bill paying consumers (check all that apply).

- Posting the Annual Water Quality Report on the Internet at [www._____](#)
- Mailing the Annual Water Quality Report to postal patrons within the service area
- Advertising the availability of the Annual Water Quality Report in the news media
- Publication of the Annual Water Quality Report in a local newspaper
- Posting the Annual Water Quality Report in public places (attach a list of locations)
- Delivery of multiple copies to single-bill addresses serving several persons such as: apartments, businesses, and large private employers
- Delivery to community organizations

Other (please specify) _____

INSTRUCTIONS

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Community Water Systems must submit this Certification Form **by September 1st** of each year to the New York State Department of Health in Albany, NY and to the county or district health department office that has jurisdiction over the water system.

The certification must indicate how the water systems Annual Water Quality Report (AWQR) was distributed and that the information within the AWQR is correct and consistent with the compliance monitoring data previously submitted to the overseeing health department.

This Certification Form should be submitted to the New York State Department of Health in Albany:
By mail to:

**NYS Department of Health
Attn: Director
Bureau of Water Supply Protection
Corning Tower, Room 1110
Empire State Plaza
Albany, NY 12237**

Or electronically to:

AWQR@health.ny.gov