

Maine Drinking Water Program Consumer Confidence Report Certification Form

PWSID#: _____ Water System Name: _____

INSTRUCTIONS:

1. Distribute copies of your Consumer Confidence Report (CCR) to all users served by your public water system **by JULY 1ST**.
2. Use the checklists below to check off the methods you use to distribute your CCR. You **MUST** select **AT LEAST ONE** option from **EACH** of the two lists below.
3. Please complete the certification section below and submit it, along with a copy of the CCR you distributed to customers, to the Maine Drinking Water Program (DWP) **by OCTOBER 1ST**.

Primary Method of Distribution - you **MUST** use **at least one** of these methods:

CHECK IF USED	Direct Delivery Method - reach each customer	ADDITIONAL INFO
<input type="checkbox"/>	Mail hard copy	
<input type="checkbox"/>	Hand deliver	
<input type="checkbox"/>	Mail notice that CCR is available on website Note: MUST include a direct URL (CCR must open when URL is clicked)	→ Provide URL: _____ Attach copy of notice (i.e. bill)
<input type="checkbox"/>	Email the direct URL	→ Attach copy of email
<input type="checkbox"/>	Email the CCR as a file attachment	→ Attach copy of email
<input type="checkbox"/>	Email CCR in message	→ Attach copy of message

AND

Secondary Method of Distribution - you **MUST** use **at least one** of these methods:

CHECK IF USED	Good Faith Effort - reach non-bill-paying consumers	ADDITIONAL INFO
<input type="checkbox"/>	Do a postal patron mailing with service area	→ Provide zip codes used in mailing
<input type="checkbox"/>	Deliver multiple copies to single bill addresses serving several people- i.e. apartment buildings, businesses, large private employers	→ Provide list of business/facilities receiving copies
<input type="checkbox"/>	Posting on internet at URL	→ URL: _____
<input type="checkbox"/>	Post the CCR in public places	→ Provide a list of where posted
<input type="checkbox"/>	Publication of CCR in local newspaper	→ Provide copy of newspaper notice
<input type="checkbox"/>	Advertising availability of CCR in news media	→ Provide copy of announcement
<input type="checkbox"/>	Deliver to community organizations	→ Provide list of facilities
<input type="checkbox"/>	Availability of paper copy	→ Provide method of sharing info
<input type="checkbox"/>	Population <500 - complete delivery by 1 st method	Only if you provided 100% distribution to all consumers by your 1 st method

Date CCR Distribution Completed: _____

Certification of Distribution and Accuracy of Consumer Confidence Report

I certify that the information in the attached CCR contains all data and required language found in the Fillable CCR provided by DWP and that the CCR was distributed by the methods noted above.

Licensed designated operator: _____
Please print

Signature: _____ **Date:** _____ (must be after date of distribution)

Email a copy of CCR, completed certification & accompanying documents to DWPMOR@maine.gov, or mail to:
ME DWP, 11 State House Station, 286 Water Street, Augusta, ME 04333-0011