



## Sampling Waiver Educational Mailing Completion Form

Please read both statements and check the one that applies to your water system. Fill out the requested information and send this form to the address listed below. If you have any questions about this form, please call 271-2862. This form along with all the materials needed to complete the mailing can be found on the DES web site at the following link [http://des.nh.gov/organization/divisions/water/dwgb/dwspp/waivers/documents/educ\\_for\\_m.pdf](http://des.nh.gov/organization/divisions/water/dwgb/dwspp/waivers/documents/educ_for_m.pdf). Failure to complete an educational mailing or to return this form may result in the rescinding of your sampling waivers.

\_\_\_\_ **I have mailed or delivered the educational material** to all of the homeowners (including tenants), potential contamination sources (including both those identified by the State and by myself), and non-residential buildings within my source protection area(s) in compliance with the Sampling Waiver Program. Also, if I have a non-transient, non-community water system (such as a business or school), I have posted the educational materials in readily accessible areas for staff or students (as applicable) to review.

\_\_\_\_ I do not have any homeowners or potential contamination sources within my source protection area(s) therefore I did not send any educational materials. However, I have posted the educational materials in readily accessible areas for staff, students, residents etc. (as applicable) to review.

**Date Educational Mailing was Completed:** \_\_\_\_\_

System EPA ID#(s): \_\_\_\_\_

System Name(s): \_\_\_\_\_

Town where system is located: \_\_\_\_\_

Signed: \_\_\_\_\_ (owner or owner's representative)

Name (type or print): \_\_\_\_\_

Date of Signature: \_\_\_\_\_

Please send this completed form to:

Debra Sonderegger  
NHDES Drinking Water and Groundwater Bureau  
29 Hazen Drive; PO Box 95  
Concord, NH 03302-0095  
Fax: 603-271-0656