

## Public Water Status Report

Drinking Water – Group A & B Water Systems

Submittal Date	Memo Number	Review Fee

*Please see the Environmental Health Fee Schedule for current fees.*

WATER SYSTEM INFORMATION
Name of Water System & ID Number
Property Address Served by Water System (Inc. City)
Assessor's Account Number

OWNER OR APPLICANT INFORMATION		
First Name	Last Name	Contact Phone
Mailing Street Address		
Mail City	Mail State	Mail Zip/Postal

SERVICES REQUESTED
<p><b>Select One:</b></p> <p><input type="checkbox"/> <b>Group A</b> Water System Water Status Report</p> <p><input type="checkbox"/> <b>Group B</b> Water System Water Status Report</p>

CERTIFICATION AND ACKNOWLEDGMENT
<p><i>By signing this document, I certify that the above information is provided as true and accurate to the best of my knowledge.</i></p>
<p>Property Owner/ Agent name printed</p> <p>Signature of Property Owner/ Agent</p> <p>Date</p>