## Public Water System – Sampling Plan Change Reporting Form

## Introduction

All Public Water Systems (PWSs) are required to submit a copy of their sampling plans for the Lead and Copper Rule, Revised Total Coliform Rule, and the Distribution Byproducts Rule to the Office of Drinking Water (ODW). PWSs must adhere to their sampling plan when collecting samples to meet the requirements of these rules.

Deviations from submitted sampling plans are allowed as long as the deviations are notified in writing to ODW immediately after sample collection and prior to result submission. This form shall be completed by an authorized representative of a PWS to notify ODW of any such deviation/s. The reporting of most changes is required by the State of Delaware, *Regulations Governing Public Drinking Water Systems* (the Regulations).

\*Submit this completed form to the Office of Drinking Water (ODW) by email, fax, or mail.

Email: mailto:Kevin.Cottman@delaware.gov

Fax: 302-741-8631

Mail: 43 South DuPont Highway, Dover, Delaware 19901

\*ODW prefers electronic submissions.

| PWS NAME:   | PWS ID#: DE  |
|---|--|
| SAMPLING PLAN TYPE:   |  |
| <ul><li>□ Lead &amp; Copper Rule</li><li>□ Revised Total Coliform Rule</li><li>□ Distribution Byproducts Rule</li></ul> |  |
| SAMPLING PLAN CHANGES:  |  |
| Current Address per existing sampling plan  | Replacement Address  |
|   |  |
|   |  |
|   |  |
|   |  |
| Attach changes in a separate sheet if more than the   | ree changes are being reported   |
| CERTIFICATION:  |  |
| I, the owner or authorized responsible party for<br>that all statements provided above are true and                     | r the water facility named above, hereby certify d accurate to the best of my knowledge. |
| Name (print clearly)  | Title (print clearly)  |
| Phone number  | Email (print clearly)  |
| Signature   | Date   |
| OFFICE USE ONLY   | Filed in Docuware: Y / N   |
| Date received:  |  |
| Date processed:   |  |
| Assigned to (EHS II) name:  |  |