

Seasonal System Start-Up Procedure Certification Form

Public Water System Name: _____

Public Water System ID #: _____

The public water system named above hereby confirms that the appropriate start-up procedures were completed according to the "Acceptable Annual Water Supply Start-up Procedures for Seasonal Public Water Systems" document. These procedures were completed before serving any water to the public. Further, the system certifies that the information contained in this report is correct and consistent with all previous information submitted to the health department.

Certified by: Name: _____

Title: _____

Signature: _____

Date: _____

Please indicate which start-up procedure was used:

- General Start-Up Procedure
- Alternate A: On-site Water System Using Chlorine Disinfection
- Alternate B: On-site Water System Using Ultra-violet (UV) Disinfection
- Alternate C: On-site Water System with disinfection waiver
- Alternate D: Off-site Public Water System

Directions:

All seasonal water systems must submit this certification form before serving water to the public along with a copy of any pre-season coliform samples and disinfectant residuals that are collected to the local health department having jurisdiction.