



DEPARTMENT OF ENVIRONMENTAL RESOURCES

3800 Cornucopia Way, Suite C, Modesto, CA 95358-9492

Phone: 209.525.6700 Fax: 209.525.6774

**Drinking Water Notification to Consumers
PROOF OF NOTIFICATION**

Name of System: _____

Please explain what caused the problem if determined and what steps have been taken to correct it.

Consumers Notified _____ **Yes** _____ **No (if no explain)**

Date of Notification: _____

On the date of notification set forth above, I served the above referenced document(s) on the consumers by:

_____ Sending a copy through the U.S. Mail, first class, postage prepaid, addressed to each of the resident(s) at the place where the property is situated, pursuant to the California Civil Code.

_____ Newspaper (if the problem has been corrected).

_____ Personally hand-delivering a copy to each of the consumers.

_____ Posting on a public bulletin board that will be seen by each of the consumers (for small non-community water systems with permission from the Environmental Resources Department)

_____ Other Approved Method: _____

I hereby declare the foregoing to be true and correct.

Dated: _____

Signature of Person Serving Notice

Notice: Complete this Proof of Notification and return it, along with a copy of the water user notification, to the Department of Environmental Resources, 3800 Cornucopia Way Suite C, Modesto, CA 95358, within **7 Days** after notifying water users.