CCR Certification Form

All Community Water Systems are required to prepare and distribute an annual Consumer Confidence Report (CCR). The CCR must be distributed to customers by July 1st of each year and the CCR Certification Form (this form) is due to the State of Alaska's Drinking Water Program by October 1st of each year.

Signature: Name: Title: Phone: Date:	Community Water System Name:	
notices of availability have been given). Further, the system certifies that the information contained in the report is correct and consistent with the compliance monitoring data previously submitted to ADEC. Date CCR was Distributed:	Community Water System I.D #:	
System-specific details on CCR distribution to customers are outlined below (check all that apply): CCR was distributed by mail or other direct delivery. CCR was distributed by direct email as an attachment or embedded in the email CCR was position by direct link to a webpage www. CCR was provided with monthly billing CCR was posted on a publicly accessible internet site (systems serving over 100,000 people) Provide website: www. Other direct delivery method (specify below) "Good faith" efforts were used to reach non-bill paying consumers. These efforts included the following methods: Mailing the CCR to postal patrons within the service area Publication of CCR in local newspaper or new media Posting the CCR in public places (Community Buildings, School, Washeteria, City Hall, Post Office, Clinic) Delivery of multiple copies to single bill addresses serving several people such as: apartments, businesses or large private employers Delivery to community organizations Posting the CCR on the internet at www. Electronic city or community newsletter at: www. Electronic announcement of CCR availability via social media Provide social media site Certified by: Signature: Name: Title: Phone: Date:	notices of availability have been given). Further, the sy	stem certifies that the information contained in the report is
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Name: . Title: . Phone: . Date: .	Certified by:	
Title: . Phone: . Date: .	Signature:	<u>.</u>
Title: . Phone: . Date: .	Name:	<u>.</u>
Date:		<u>.</u>
	Phone:	
	Date:	<u>.</u>
E-mail:	E-mail:	<u>.</u>

Print, sign, then mail, fax or email a **copy of the CCR** and this certification form to your local office:

Anchorage DW Program 555 Cordova Street Anchorage, AK 99501 Fax: 269-7650

Phone: 269-7623 or (866) 956-7656 dec.dwdata.Anchorage@alaska.gov

Fairbanks DW Program 610 University Ave. Fairbanks, AK 99709 Fax: 451-2188

Phone: 451-2108 or (800) 770-2137 Phone: 262-5210 dec.dwdata.fairbanks@alaska.gov

Soldotna DW Program 43335 K-Beach Road, Suite 11 Soldotna, AK 99669 Fax: 262-2294

dec.dwdata.soldotna@alaska.gov

Wasilla DW Program 1700 E. Bogard Road Building B, Suite 103 Wasilla, AK 99654 Fax: 376-2382

Phone: 376-1850

dec.dwdata.wasilla@alaska.gov