

Waiver of Special Notification for Distribution System Samples

On October 1, 2006, the Rules Governing Public Water Systems were amended to require special notification to a person authorizing a water supplier to take water samples from property not owned or controlled by the water supplier. When an individual water sample taken from private property tests positive for coliform bacteria or exceeds an action level, maximum contaminant level or maximum residual disinfectant level, Rule 15A NCAC 18C .1523 (c) requires a water supplier to inform the person authorizing the sample about the test results, in writing.

The special notification will contain the test results and describe the potential health effects of the contaminant found. Depending on the type of contaminant, notice must be provided within 24 or 48 hours of the supplier's receipt of the analytical results. If the person authorizing the water sample does not wish to receive the special notification, that person may waive the requirement in writing. A signed waiver is valid for five years.

Since you are the person authorizing the collection of drinking water samples at the location specified below, you may waive your right to be notified about water sample results. If you waive the special notification requirements, the water supplier is not required to inform you about individual sample results or of potential health effects if any water samples from that location test positive for coliform bacteria or exceed an action level, maximum contaminant level or maximum residual disinfectant level. While you may waive notification, the Public Water Supply Section recommends that you receive the test results and potential health effects information and do not use this waiver flexibility of the law.

If you choose to waive the special notification requirements, complete the following:

I am the person authorizing the collection of drinking water samples at the sampling location specified below and hereby waive my right to be informed of the analytical results and health effects language as required under the Public Notification Requirements of 15A NCAC 18C .1523 (c). I understand that this waiver is valid for five years from the date of my signature.

Sampling Location Street Address: _____ **City:** _____

Printed Name: _____

Signature: _____ **Date:** _____

For more information, please contact our water system as follows:

Responsible Person	System Name	System Address (Street)
Phone Number	System PWSID #	System Address (City/State/Zip)

**** Note to supplier of water:** This waiver applies only to the specific sampling location noted above.

Within 10 days of the signature date, return a copy of all signed waivers to:
Public Water Supply Section, 1634 Mail Service Center, Raleigh, NC 27699-1634
Attn. Public Notification Rule Manager