



County of Riverside
DEPARTMENT OF ENVIRONMENTAL HEALTH

P.O. BOX 7909 • RIVERSIDE, CA 92513-7909

JEFF JOHNSON, DIRECTOR

PROOF OF NOTIFICATION

Name of Water System: _____ Water System No. _____

As required by the California Health and Safety Code, this acknowledges that I have notified the users that this water system is a State Small Water System and the regulatory requirements for the operation are less extensive than requirements for larger public water systems.

This notice is for period (year): _____

This notification was made using the following method(s):

- | | |
|--|-----------------------|
| <input type="checkbox"/> Verbal, to each customer/connection | Date completed: _____ |
| <input type="checkbox"/> Public Posting of Notice | Date completed: _____ |
| <input type="checkbox"/> Mail or Hand Delivery of a Written Notice | Date completed: _____ |

THIS FORM MUST BE COMPLETED AND RETURNED TO THIS DEPARTMENT ANNUALLY

Print Name

Signature of Water System Representative

Office Locations: Blythe • Corona • Hemet • Indio • Murrieta • Palm Springs • Riverside