

Consumer Confidence Report (CCR) Certification Form

| vvater | System Name: | | |
|---|---|-------------------------|---|
| Water | System No.: SC | Report Year: | Population Served: |
| The Community Water System (CWS) named above hereby confirms that all provisions under R.61-58.12 requiring the development of, distribution of, and notification of a consumer confidence report have been executed. Further, the CWS certifies the information contained in the report is correct and consistent with the compliance monitoring data. In addition, if this report is being used to meet Tier 3 Public Notification requirements, as denoted by the checked box below, the CWS certifies that public notification has been provided to its consumers in accordance with the requirements of R.61-58.6.E(4). | | | |
| Certifie | ed by: Name: | | Title: |
| | Signature: | | Phone #: |
| | Delivery Achieved Date: | | Date Reported to State: |
| The | CCR includes the mandated Public I | Notice for a monitori | ng or Tier 3 violation (check box, if yes) |
| | | Dockson State Bulletin | |
| CHECK | all methods used for distribution (se | | ery requirements and methods): |
| 님 | | Hand Delivery | |
| Notification of Availability of Paper Copy (other than in the CCR itself) | | | |
| Notification Method(i.e. US Mail, door hanger) | | | |
| Ц | Notification of CCR URL <u>Direct UR</u> | RL address: | |
| - | Notification Method | (i.e. | on bill, bill stuffer, separate mailing, email) |
| ☐ Direct email delivery of CCR (attached?☐ or embedded? ☐) | | | |
| | Notification Method | | (i.e. on bill, bill stuffer, separate mailing) |
| | Newspaper (attach PDF copy) What F | Paper? | Date Published |
| | Notification Method | | (i.e. US Mail, on bill, bill stuffer, door |
| | hanger, a postcard dedicated to the CC | CR, or email) | (i.e. US Mail, on bill, bill stuffer, door |
| | bood faith" efforts (in addition to the above required methods) were used to reach non-bill paying consumers ch as industry employees, apartment tenants, etc. Extra efforts included the following methods: | | |
| | | | |
| | mailing the CCR to postal patro | ons within the service | area |
| | advertising the availability of th | e CCR in news media | (attach copy of announcement) |
| | publication of the CCR in local | | |
| | posting the CCR in public place | | . F 1 |
| | | ngle bill addresses se | rving several persons such as: apartments, |
| | delivery to community organiza | ations such as: (attach | list if needed) |
| Note | | acebook) or automate | ed phone calls DO NOT meet existing CCR |
| SUB perm | MIT FORM 3999 AND PDF ATTACHM nit number and your Water System Nam | ENTS TO: CCR@dh | ec.sc.gov, Subject Line shall include your 7-digit on to DHEC via Fax at 803-898-3795 or mail to |

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

ATTN: CCR RULE MANAGER, Bureau of Water, 2600 Bull Street, Columbia, SC, 29201.

DHEC 3999 (03/2021)