



# ASBESTOS-FREE CERTIFICATION OR ASBESTOS SAMPLING PLAN FOR PWSs

See page 2 for instructions.

## I. General Information

Public Water System (PWS) Name:		
PWS Identification Number:	PWS Type:	<input type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community
PWS Owner:		
Contact Person:	Contact Person's Title:	
Contact Person's Mailing Address:		
City:	State:	Zip Code:
Contact Person's Telephone Number:	Contact Person's Fax Number:	
Contact Person's E-Mail Address:		

## II. Asbestos-Free Certification

I am duly authorized to sign this form on behalf of the PWS identified in Part I of this form. I certify that, to the best of my knowledge and belief, there are no asbestos-cement pipes or other asbestos containing components in said PWS. This certification is for the scheduled monitoring year of \_\_\_\_\_.

\_\_\_\_\_  
Signature and Date

\_\_\_\_\_  
Printed or Typed Name

\_\_\_\_\_  
Title

## III. Asbestos Sampling Plan

A. Scheduled Monitoring Year: \_\_\_\_\_

B. Asbestos Sampling Location\*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* *The asbestos sampling location shall be a tap served by asbestos-cement pipe. (This does not mean that the asbestos sampling location must be a consumer's tap. The asbestos sampling location may be any convenient place in a portion of the distribution system served by asbestos-cement pipe.)*

C. Reason Why Above Asbestos Sampling Location Was Chosen: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D. Conditions Under Which Asbestos Sample Will Be Taken\*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* *Asbestos samples shall be taken under conditions where asbestos contamination is most likely to occur. (Waters with low pH [less than approximately 7.5 or 8, unless the waters contain high calcium, alkalinity, and silicate levels], very high sulfate concentrations, and polyphosphates are particularly destructive to asbestos-cement pipe.)*

## ASBESTOS-FREE CERTIFICATION OR ASBESTOS SAMPLING PLAN FOR PWSs

INSTRUCTIONS: This form shall be completed and submitted by community water systems (CWSs) and by non-transient non-community water systems (NTNCWSs). DURING EACH YEAR THAT YOUR WATER SYSTEM IS SCHEDULED TO MONITOR FOR ASBESTOS,\* complete this form and submit it to the appropriate Department of Environmental Protection District Office or Approved County Health Department. All information provided on this form shall be typed or printed in ink. Complete Part I of this form and either Part II or Part III of this form. Complete Part II if your water system has no asbestos-containing components and you can certify that your water system is free of asbestos; or complete Part III if your water system has asbestos-containing components or if you are otherwise unable to certify that your water system is free of asbestos. If you complete Part II, submit this form at any time during each year that your water system is scheduled to monitor for asbestos. If you complete Part III, submit this form at the same time you submit required asbestos test results.

\* CWSs and NTNCWSs are required to monitor for asbestos during the first three-year compliance period of each nine-year compliance cycle in accordance with the following schedule: (1) CWSs that serve more than 3,300 persons shall monitor during the first year of the three-year compliance period; (2) CWSs that serve 3,300 or fewer persons shall monitor during the second year of the three-year compliance period; and (3) NTNCWSs shall monitor during the third year of the three-year compliance period. The first nine-year compliance cycle began January 1, 1993, and ended on December 31, 2001; the second nine-year compliance cycle began January 1, 2002, and ends on December 31, 2010; etc. Within the first nine-year compliance cycle (1993 through 2001), the first three-year compliance period began January 1, 1993, and ended December 31, 1995; within the second nine-year compliance cycle (2002 through 2010), the first three-year compliance period began January 1, 2002, and ends December 31, 2004; etc.