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STATE OF CALIFORNIA
WATER RESOURCES CONTROL BOARD
DIVISION OF DRINKING WATER

TO: Tranquility Irrigation District
P.O. Box 487
Tranquility, CA 93668
Water System No. 1010030

Attn: Danny Wade

**CITATION FOR VIOLATION OF CALIFORNIA CODE OF REGULATIONS, TITLE 22,
SECTION 64426.1 (b) (2) - TOTAL COLIFORM MAXIMUM CONTAMINANT LEVEL**

December 2014 and January 2015

CITATION NO. 03-23-15C-005

Issued on February 27, 2015

Section 116650 of the California Health and Safety Code authorizes the issuance of a citation to a public water system for violation the California Safe Drinking Water Act (Health and Safety Code, Division 104, Part 12, Chapter 4, commencing with Section 116270) (hereinafter "California SDWA"), or any regulation, standard, permit or order issued or adopted thereunder.

The State Water Resources Control Board, acting by and through its Division of Drinking Water (hereinafter "Division") and the Deputy Director for the Division (hereinafter "Deputy Director"), hereby issues a citation to the Tranquility Irrigation District (hereinafter, District) (mailing address: P.O. Box 487, Tranquility, CA 93668) for violation of California Code of Regulations (CCR), Title 22, Section 64426.1 subsections (b)(2).

32 APPLICABLE AUTHORITIES

33 **Section 116650 of California Health and Safety Code provides:**

34 (a) If the Division determines that a public water system is in violation of this chapter or
35 any regulation, permit, standard, citation, or order issued or adopted thereunder, the
36 Division may issue a citation to the public water system. The citation shall be served upon
37 the public water system personally or by certified mail. Service shall be deemed effective
38 as of the date of personal service or the date of receipt of the certified mail. If a person to
39 whom a citation is directed refuses to accept delivery of the certified mail, the date of
40 service shall be deemed to be the date of mailing.

41 (b) Each citation shall be in writing and shall describe the nature of the violation or
42 violations, including a reference to the statutory provision, standard, order, citation, permit,
43 or regulation alleged to have been violated.

44 (c) A citation may specify a date for elimination or correction of the condition constituting
45 the violation.

46 (d) A citation may include the assessment of a penalty as specified in subdivision (e).

47 (e) The Division may assess a penalty in an amount not to exceed one thousand dollars
48 (\$1,000) per day for each day that a violation occurred, and for each day that a violation
49 continues to occur. A separate penalty may be assessed for each violation.

50 **California Code of Regulations, Title 22, Section 64426.1, subsections (a) and (b)**
51 **provide, in relevant part:**

52 **§64426.1. Total Coliform Maximum Contaminant Level (MCL).**

53 (a) Results of all samples collected in a calendar month pursuant to Sections 64423,
54 64424, and 64425 that are not invalidated by the Division or the laboratory shall be
55 included in determining compliance with the total coliform MCL. Special purpose
56 samples such as those listed in §64421(b) and samples collected by the water
57 supplier during special investigations shall not be used to determine compliance with
58 the total coliform MCL.

59 (b) A public water system is in violation of the total coliform MCL when any of the
60 following occurs:

61 (1) For a public water system which collects at least 40 samples per month, more
62 than 5.0 percent of the samples collected during any month are total coliform-
63 positive; or

64 (2) For a public water system which collects fewer than 40 samples per month,
65 more than one sample collected during any month is total coliform-positive

66 **§ 64424. Repeat Sampling**

67 Specifies that for systems collecting only one sample per month or quarter, a
68 repeat sample set shall consist of four (4) samples as follows: one (1) from the
routine sample site at which the positive occurred, one (1) from the upstream

70 repeat sample site, one (1) from the downstream repeat sample site and one (1)
71 from the operating well or another location within the system that would best help
72 to identify the source or area of contamination.

73 If a public water system for which fewer than five routine samples per month are
74 collected has one or more total coliform-positive samples, the water supplier shall
75 collect at least five routine samples the following month. If the supplier stops
76 supplying water during the month after the total coliform-positive(s), at least five
77 samples shall be collected during the first month the system resumes operation.

78

79 **The Groundwater Rule**

80

81 Adopted by the Division, effective August 18, 2011, the rule requires the collection
82 of a sample for bacteriological evaluation from wells serving the system in
83 response to a coliform positive distribution sample.

84

85

STATEMENT OF FACTS

86 The District is operated under Water Supply Permit No. 77-010, issued in April 1977 and
87 amended in January 2008. Tranquility Irrigation District is a community water system
88 serving a population of approximately eight-hundred (800) through approximately three-
89 hundred forty-eight (348) service connections. The District is served by two wells and is
90 required to collect two (2) routine bacteriological samples a month.

91

92 The bacteriological water analysis results submitted by the District reported the presence
93 of total coliform bacteria in four (4) of seven (7) samples in December of 2014 and three
94 (3) of eight (8) in January 2015. None of the positive samples showed the presence of
95 fecal coliform or *E. coli* bacteria.

96

97 On December 9, 2014, the District collected one (1) routine bacteriological sample and
98 was positive for total coliform and absent for *E. coli* and fecal coliform. On December 11,
99 2014, the District then collected three (3) repeat samples and all three (3) showed a
100 presence of total coliform and absent for *E. coli* and fecal coliform. On December 12,
101 2014, the District collected three (3) repeat samples and two (2) source repeat samples
102 from Wells 6 and 7. The two (2) of the three (3) repeat samples showed a presence of

103 total coliform and absent for E. coli and fecal coliform. Well 6 and 7 source bacteriological
 104 samples showed an absence of total coliform. No additional repeat samples were
 105 collected for the month of December 2014. On December 15, 2014, the District informed
 106 the Division that routine and repeat samples collected were positive for total coliform and
 107 absent for E. coli and fecal coliform. On January 7, 2014, the District collected one (1)
 108 routine sample and two (2) repeat samples. However, all samples collected on January 7,
 109 2015 were labeled "routine" on the bacteriological analyses. The District stated via email
 110 that the samples collected on January 7, 2015 were one routine sample and two repeat
 111 samples. The two (2) repeat samples collected on January 7, 2015 were positive for total
 112 coliform and absent for E. coli and fecal coliform. The District collected repeat samples on
 113 January 9, 2015 and one of the samples had a presence of total coliform and absent for
 114 E. coli and fecal coliform. Well 6 and 7 bacteriological samples were collected on January
 115 9, 2015 and were absent for total coliform. The District then collected two (2) samples on
 116 January 26, 2015 both labeled "routine" on the bacteriological analyses. However, the
 117 District stated via email that one (1) was a routine sample and the other bacteriological
 118 sample was a repeat sample. The operator believes that the iron and manganese has
 119 become worse with the new wells online and with a lower water level it is difficult to
 120 maintain chlorine residuals.

121

122 The following table summarizes the bacteriological monitoring conducted during
 123 December 2014 and January 2015:

124

Collection Date	Number of Samples	Sample Labeled	Number TC positive	Number E. Coli positive
12/9/2014	1	Routine	1	0
12/11/2014	3	Repeat	3	0
12/12/2014	3	Repeat	3	0
1/07/2015	3	1 Routine; 2 Repeat	2	0

1/09/2015	3	Repeat	1	0
1/26/2015	2	1 Routine; 1 Repeat	0	0

125 Due to the above-mentioned total coliform positive samples, the District failed the total
 126 coliform MCL for the months of December 2014 and January 2015. Results for water
 127 samples tested for coliform bacteria during December 2014 and January 2015 are
 128 summarized in Attachment A.

129
 130 The Groundwater Rule adopted by the Division, effective August 18, 2011, requires the
 131 collection of a sample for bacteriological evaluation from wells serving the system in
 132 response to a coliform positive distribution sample. **This requirement was met.**

133
 134 VIOLATIONS

135 The Drinking Water Field Operations Branch of the State Water Resources Control Board
 136 – Division of Drinking Water (hereinafter 'Division') hereby issues a Citation to District
 137 (hereinafter 'District'), for failure to comply with Section 116555(a)(1) of the CHSC and
 138 Section 64426.1(b)(2) of Title 22, California Code of Regulations (CCR). Specifically, the
 139 Water System (mailing address: P.O. Box 487, Tranquility, CA 93668) failed to comply
 140 with the total coliform Maximum Contaminant Level (MCL) for the months of December
 141 2014 and January 2015.

142
 143 ASSOCIATED VIOLATIONS

144 Additionally, the District has failed to comply with the following Section of Title 22, CCR:

145
 146
 147 Sections 64424(a) and 64424(b) specifies that for systems collecting only one sample per
 148 month or quarter, a repeat sample set shall consist of four (4) samples as follows: one (1)
 149 from the routine sample site at which the positive occurred, one (1) from the upstream
 repeat sample site, one (1) from the downstream repeat sample site and one (1) from the

151 operating well or another location within the system that would best help to identify the
152 source or area of contamination.

153

154 Section 64423.1(a) specifies that the water supplier shall designate (label) each sample
155 as routine, repeat, replacement, or "other" pursuant to Section 64421(b).

156

157 The District System failed to properly label any of the samples collected during December
158 2014 and January 2015, as 'Routine', 'Repeat', or 'Other'.

159

160

161

NOTIFICATION REQUIREMENTS

162 Section 64426.1(c) requires a public water system to notify the Division and the
163 consumers of the water system, when a violation of Section 64426.1(b)(1) through (4) the
164 total coliform MCL occurs. Notification to the Division shall be by the end of the business
165 day on which the violation has been determined. If the Division is closed, notification shall
166 be within 24 hours of the determination. **The Division was not notified in a timely**
167 **manner and as required.**

168

169 A Tier 2 Public Notice for violation of paragraph 64426.1(b) (2) (Attachment B) shall be
170 given pursuant to Section 64463.4 and 64465. The Tier 2 Public Notice shall include the
171 mandatory health effects language from Appendix 64465-A for a total coliform MCL
172 failure.

173

174 Section 64463.4 allows community water systems to use mail or direct delivery to each
175 customer and the use of one or more of the following methods: publication in a daily or
176 weekly newspaper, posting the public notice in a conspicuous public place within the
177 water system or on the internet, or by delivery to community organizations.



179 The District shall either mail or conduct direct delivery of the public notice to all customers
180 served within the general service area. Section 116450(g) requires that upon receipt of
181 notification from a public water system, schools must notify school employees, students,
182 and parents (if the students are minors), residential rental property owners or managers
183 (including nursing homes and care facilities) must notify their tenants and business
184 property owners, managers or operators must notify employees of businesses located on
185 the property. These secondary notification requirements are included in the public notice.

186

187 Proof of Notification is required. The District has not completed public notification and has
188 not submitted the proof of notification for the months of December 2014 and January
189 2015.

190

DIRECTIVES

191 The District is hereby directed to take the following actions:

192

193 1. By March 31, 2015 the Tranquility Irrigation District water system shall provide
194 public notification of the total coliform Maximum Contaminant Level failure by mail
195 or conduct direct delivery of the public notice to all customers served within the
196 general service area. The Water System is additionally required to use one or
197 more of the following notification methods: publication in a daily or weekly
198 newspaper, posting the public notice in a conspicuous public place within the
199 water system or on the internet, or by delivery to community organizations.

200

201 By April 15, 2015 the District shall provide proof of notification of the total coliform
202 MCL violation notification to each consumer using Attachment E, to:

203

204

205

206

207

208

Betsy S. Lichti, Senior Sanitary Engineer
Department of Public Health
Drinking Water Field Operations Branch
265 W. Bullard Avenue, Suite 101
Fresno, CA 93704

209

210

211 2. The District shall designate (label) each routine, repeat, replacement, or other
212 sample as 'Routine', 'Repeat' or 'Other' as required by Section 64423.1(a) and as
213 discussed in this Citation whenever a repeat sample is collected in follow-up to a
214 positive coliform bacteria sample.

215

216

217 3. The District shall notify the Department of any further violations of the total coliform
218 MCL by the end of the business day on which the violation has been determined,
219 or, if the Department is closed, within 24 hours of the determination.

220

221 4. By April 15, 2015, the District shall complete and submit the enclosed "Positive
222 Total Coliform Investigation" form to the Division that describes the incident and all
223 corrective actions taken, and the results of the investigation. The appropriate
224 investigation report is provided as Attachment D.

225

226

227

228

PARTIES BOUND

229 This Citation shall apply to and be binding upon Tranquility Irrigation District, its officers,
230 directors, shareholders, agents, employees, contractors, successors, and assignees.

231

232

SEVERABILITY

233 The Directives of this Citation are severable, and Tranquility Irrigation District shall comply
234 with each and every provision thereof, notwithstanding the effectiveness of any other
235 provision.

236

237

FURTHER ENFORCEMENT ACTION

238

The California SDWA authorizes the Division to: issue citation with assessment of

239

administrative penalties to a public water system for violation or continued violation of the

240

requirements of the California SDWA or any permit, regulation, permit or order issued or

241

adopted thereunder including, but not limited to, failure to correct a violation identified in a

242

citation or compliance order. The California SDWA also authorizes the Division to take

243

action to suspend or revoke a permit that has been issued to a public water system if the

244

system has violated applicable law or regulations or has failed to comply with an order of

245

the Division; and to petition the superior court to take various enforcement measures

246

against a public water system that has failed to comply with violates an order of the

247

Division. The Division does not waive any further enforcement action by issuance of this

248

citation.

249

2/27/15

250

Date

251

Betsy S. Licht

252

Betsy S. Licht, P.E.,

253

District Engineer

254

Division of Drinking Water

255

State Water Resources Control Board

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Attachments:

262

- A. Bacteriological Distribution Monitoring Report
- B. Public Notice for December 2014 and January 2015
- C. Proof Notification for December 2014 and January 2015
- D. Total Coliform Investigation Form

263

264

265



Bacteriological Distribution Monitoring Report

1010030 Tranquility Irrigation District

Distribution System Freq: 2/M

Sample Date	Time	Location	T Coli	E Coli	F Coli	Type	Cl2	Violation	Comment
12/9/2014	12:53	Site 3	P	A		Routine			
12/11/2014	13:12	Site 1	P	A		Repeat			
12/11/2014	13:39	Site 3	P	A		Repeat			
12/11/2014	13:55	Site 2	P	A		Repeat			
12/12/2014	15:30	Site 1	A	A		Repeat			
12/12/2014	16:07	Site 3	P	A		Repeat			
12/12/2014	16:22	Site 2	P	A		Repeat			
1/7/2015	11:27	Site 3	P	A		Repeat			
1/7/2015	11:45	Site 2	P	A		Repeat			
1/7/2015	11:58	Site 1	A	A		Routine			
1/9/2015	9:06	Site 1	<1	<1		Repeat			
1/9/2015	9:22	Site 2	32.7	<1.0		Repeat			
1/9/2015	9:41	Site 3	<1.1	<1.1		Repeat			
1/26/2015	10:20	Site 1	<1.0	<1.0		Routine			
1/26/2015	11:08	Site 2	<1.0	<1.0		Repeat			

Violation Key

MCL	Exceeds the maximum contaminant level	MR5	Incorrect number of repeat samples as follow-up to a positive sample
MR1	No monthly sample for the report month	MR6	No source sample
MR2	No quarterly sample for the report month	MR7	No summary report submitted
MR3	Incorrect number of routine samples for the report month	MR8	Other comments and/or info
MR4	Did not collect 5 routine samples for previous month's positive sample	MR9	Cl2 not reported

Source Bacteriological Monitoring Report

1010030 *Tranquility Irrigation District*

<i>Sample Date</i>	<i>Time</i>	<i>Source</i>	<i>Sample Type</i>	<i>Test Method</i>	<i>T Coli</i>	<i>E Coli</i>	<i>F Coli</i>	<i>HPC</i>	<i>Violation</i>	<i>Comments</i>
12/12/2014	15:43	Well 7	Well	P/A	A	A				
12/12/2014	15:54	Well 6	Well	P/A	A	A				
1/9/2015	9:57	Well 6	Well	MPN	<1.0	<1.0				
1/9/2015	10:14	Well 7	Well	MPN	<1.0	<1.0				

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Este informe contiene información muy importante sobre su agua potable.
Tradúzcalo o hable con alguien que lo entienda bien.

**Tranquility Irrigation District Has Levels of Coliform Bacteria
Above the Drinking Water Standard**

Our water system recently failed a drinking water standard. Although this incident was not an emergency, as our customers, you have a right to know what you should do, what happened and what we did to correct this situation.

We routinely monitor for drinking water contaminants. We took ____ () samples to test for the presence of coliform bacteria in December 2014 and January 2015. _____ of these samples showed the presence of total coliform bacteria. The standard is that no more than 1 sample per month may show the presence of coliform bacteria.

What should I do?

- **You do not need to boil your water or take other corrective actions.**
- This is not an emergency. If it had been, you would have been notified immediately. Total coliform bacteria are generally not harmful themselves. *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially-harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.*
- Usually, coliforms are a sign that there could be a problem with the treatment or distribution system (pipes). Whenever we detect coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal coliform or *E. coli*, are present. **We did not find any of these bacteria in our subsequent testing.**
- People with severely compromised immune systems, infants, and some elderly may be at increased risk. These people should seek advice about drinking water from their health care providers. General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1(800) 426-4791.
- If you have other health issues concerning the consumption of this water, you may wish to consult your doctor.

What happened? What is being done?

[Describe corrective action]. _____
_____.

For more information, please contact _____ [name of contact] at _____ [phone number] or _____ [mailing address].

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this public notice in a public place or distributing copies by hand or mail.

Secondary Notification Requirements

Upon receipt of notification from a person operating a public water system, the following notification must be given within 10 days [Health and Safety Code Section 116450(g)]:

- **SCHOOLS:** Must notify school employees, students, and parents (if the students are minors).
- **RESIDENTIAL RENTAL PROPERTY OWNERS OR MANAGERS** (including nursing homes and care facilities): Must notify tenants.
- **BUSINESS PROPERTY OWNERS, MANAGERS, OR OPERATORS:** Must notify employees of businesses located on the property.

This notice is being sent to you by Tranquility Irrigation District.

Date distributed: _____.

PROOF OF NOTIFICATION

(Return with copy of notice)

As required by Section 116450 of the California Health and Safety Code, I notified all users of water supplied by the **Tranquility Irrigation District** of the failure to meet the **total coliform bacteria MCL** for the months of **December 2014 and January 2015** as directed by the Department.

Notification was made on _____ by
(date)

_____ **mailed** and/or **hand delivered** and/or **posted** written notice.
(circle all that apply)

Signature of Water System Representative

Printed Name

Date

DISCLOSURE: Be advised that Section 116725 and 116730 of the California Health and Safety Code state that any person who knowingly makes any false statement on any report or document submitted for the purpose of compliance with the attached order may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of violation, or be imprisoned in the county jail not to exceed one year, or by both the fine and imprisonment.

Due: April 15, 2015
Total Coliform MCL Failure: December 2014 and January 2015
System Number: 1010030
Citation No.: 03-23-15C-005

POSITIVE TOTAL COLIFORM INVESTIGATION
Simple Well with Pressure Tank Systems

Attachment D

This form is intended to assist public water systems in completing the investigation required by the SWRCB Drinking Water Division (Section 64426(b) of Title 22, California Code of Regulations) and may be modified to take into account conditions unique to the system.

ADMINISTRATIVE INFORMATION

PWS Name:		PWS ID NUMBER:	
Name		Address	
Operator in Responsible Charge (ORC)		Telephone #	
Person that collected TC samples if different than ORC			
Owner			
Certified Laboratory for Microbiological Analyses			
Date Investigation Completed:			
Month(s) of Total Coliform MCL Failure:			

INVESTIGATION DETAILS

SOURCE	WELL (name)	WELL (name)	WELL (name)	WELL (name)	COMMENTS
1. Inspect each well head for physical defects and report					
a. Is raw water sample tap upstream from point of disinfection?					
b. Is wellhead vent pipe screened?					
c. Is wellhead seal watertight?					
d. Is well head located in pit or is any piping from the wellhead submerged?					
e. Does the ground surface slope towards well head?					
f. Is there evidence of standing water near the wellhead?					
g. Is there a check valve on the well discharge line? Is the check valve seating properly?					
h. Are there any connections to the raw water piping that could be cross connections? (describe all connections in comments)					
i. Is the wellhead secured to prevent unauthorized access?					
j. To what treatment plant (name) does this well pump?					
k. How often do you take a raw water total coliform (TC) test?					
l. Provide the date and result of the last TC test at this location					

POSITIVE TOTAL COLIFORM INVESTIGATION

Attachment D

Page 2 of 3

DISTRIBUTION SYSTEM	SYSTEM RESPONSES
1. What is the minimum pressure you are maintaining in the distribution system?	
2. Did pressure in the distribution system drop to less than 5 psi prior to experiencing the TCR positive finding?	
3. Has the distribution system been worked on within the last week? (service taps, hydrant flushing, main breaks, main extensions, etc.) If yes, provide details.	
4. Are there any signs of excavations near your distribution system not under the direct control of your maintenance staff?	
5. Did you inspect your distribution system to check for mainline leaks? Do you or did you have a mainline leak?	
6. If there was a mainline leak, when was it repaired?	
7. On what date was the distribution system last flushed?	
8. Is there a written flushing procedure you can provide for our review?	
9. Do you have an active cross connection control program?	
10. What is name and phone number of your Cross-Connection Control Program Coordinator?	
11. Is the review and testing of backflow prevention devices current?	
12. On what date was the last physical survey of the system done to identify cross-connections?	

SAMPLE SITE EVALUATION (Complete for all TC+ or EC+ findings)	Routine Site TC+ or EC+	Upstream Site	Downstream Site	Sample 4 (specify)
1. What is the height of the sample tap above grade? (inches)				
2. Is the sample tap located in an exterior location or is it protected by an enclosure?				
3. Is the sample tap threaded, have a swing arm (kitchen sink) or aerator (sinks)?				
4. Is the sample tap in good condition, free of leaks around the stem or packing?				
5. Can the sample tap be adjusted to the point where a good laminar flow can be achieved without excessive splash?				
6. Is the sample tap and area around the sample tap clean and dry (free of animal droppings, other contaminants or spray irrigation systems)				
7. Is the area around the sample tap free of excessive vegetation or other impediments to sample collection				
8. Describe how the tap was treated in preparation for sample collection (ran water, swabbed with disinfectant, flamed, etc.)				
9. Is this sample tap designated on the sampling plan submitted with this information request?				
10. What were weather conditions at the time of positive sample (rainy, windy, sunny)?				

POSITIVE TOTAL COLIFORM INVESTIGATION

Attachment D

Page 3 of 3

GENERAL OPERATIONS:	Response
1. Where there any power outages that affected water system facilities during the 30 days prior to the TC+ or EC + findings?	
2. Where there any main breaks, water outages, or low pressure reported in the service area where TC+ or EC+ samples were located.	
3. Does the system have backup power or elevated storage?	
4. During or soon after bacteriological quality problems, did you receive any complaints of any customers' illness suspected of being waterborne? How many?	
5. What were the symptoms of illness if you received complaints about customers being sick?	

ADDITIONAL INFORMATION TO BE SUBMITTED WITH RESPONSES TO THE ABOVE QUESTIONS

1. **Sketch** of System showing all sources, treatment locations, storage tanks, microbiological sampling sites and general layout of the distribution system including the location of all hazardous connections such as the wastewater treatment facility.
2. A set of photographs of the well, pressure tanks, and storage tanks in the system may be submitted if they would show that the contamination is directly related and changes have been made since the last inspection by our Division.
3. Name, certification level and certificate number of the Operator in Responsible Charge.
4. Copy of the last cross connection survey performed that identifies the location of all unprotected cross connections.

SUMMARY: BASED ON THE RESULTS OF YOUR INVESTIGATION AND ANY OTHER INFORMATION AT YOUR DISPOSAL, WHAT DO YOU BELIEVE TO BE THE CAUSE OF THE POSITIVE TOTAL COLIFORM SAMPLES FROM YOUR PUBLIC WATER SYSTEM?

CERTIFICATION: I CERTIFY THAT THE INFORMATION SUBMITTED IN RESPONSE TO THE QUESTIONS ABOVE IS ACCURATE TO THE BEST OF MY PROFESSIONAL KNOWLEDGE

NAME: _____ TITLE: _____ DATE: _____