

1 **APPLICABLE AUTHORITIES**

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

3
4 (a) If the department determines that a public water system is in violation of this
5 chapter or any regulation, permit, standard, citation, or order issued or adopted
6 thereunder, the department may issue a citation to the public water system. The citation
7 shall be served upon the public water system personally or by certified mail. Service
8 shall be deemed effective as of the date of personal service or the date of receipt of the
9 certified mail. If a person to whom a citation is directed refuses to accept delivery of the
10 certified mail, the date of service shall be deemed to be the date of mailing.

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

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

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

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

22
23 **California Code of Regulations, Title 22, Section 64431, subsection (a) provides,**
24 **in relevant part:**

25
26 (a) Public water systems shall comply with the primary MCLs in Table 64431-A
27 as specified in this article.

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Table 64431-A

Maximum Contaminant Levels

Inorganic Chemicals

| Chemical | Maximum Contaminant Level (mg/L) |
|----------|----------------------------------|
| Fluoride | 2.0 |

STATEMENT OF FACTS

The SMWC water system is operated under Water Supply Permit No. 04-14-98P-018, issued on April 30, 1998, amended by Water Supply Permit No. 05-20-13PA-003 issued on January 23, 2013.

SMWC supplies potable water to a population of approximately 9,992 through 2,914 metered service connections in the City of Yucaipa and the City of Calimesa. In 2013, SMWC provided about 794 million gallons of potable water to its customers via approximately 50 miles of pipeline in its 2,370 acre service area. Local groundwater sources account for all of the water supplied to meet system demands. SMWC operates 8 active groundwater wells that produce potable water for domestic use. SMWC's potable groundwater wells produce water from the Upper Santa Ana Valley Groundwater Basin.

SMWC's water distribution system consists of four pressure zones, with four distribution reservoirs providing a total finished water storage capacity of 4.75 million gallons (MG). Water is pumped from the lower elevation pressure zones to the higher elevation pressure zones via four booster pump stations. Seven of SMWC's 8 wells pump directly into the distribution system of Pressure Zone 3, which is the lowest elevation pressure zone serving approximately 170 customer service connections. Well 17, the newest groundwater well, pumps directly to Reservoir No. 3, serving Pressure Zone 3.

1 In a notice of violation letter dated January 11, 2011, the Division directed SMWC to
2 initiate quarterly monitoring for fluoride at Well 09, after the Division found that a sample
3 collected in March 2010 from Well 09 exceeded the fluoride Maximum Contaminant
4 Level (MCL) of 2.0 mg/L. The fluoride monitoring results collected from Well 09 since
5 then have shown fluoride concentrations at Well 09 ranging from 1.2 mg/L to 2.3 mg/L.
6 Per Title 22, Section 64432(i), compliance with the fluoride MCL is based on a running
7 annual average (RAA). Based on the fluoride monitoring results submitted by SMWC to
8 date, the quarterly average and the RAA calculations are summarized in Table 1. The
9 data shows that SMWC has remained in compliance with the fluoride MCL between first
10 quarter 2011 and first quarter 2014.

11
12 In second quarter 2014, SMWC collected a sample on June 9, 2014 from Well 09, and
13 submitted the sample to the laboratory on the same day for fluoride analysis. The
14 laboratory analyzed the sample for fluoride and issued a report dated June 12, 2014
15 showing a fluoride sample result of 2.3 mg/L for Well 09. No additional fluoride samples
16 were reported for Well 09 for second quarter 2014. The RAA calculated from this result,
17 and the preceding three quarterly average results, 2.1, 2.0 and 1.9, is 2.1 mg/L, which
18 exceeds the fluoride MCL of 2.0 mg/L.

19
20 In third quarter 2014, SMWC collected a sample on September 8, 2014 from Well 09,
21 and submitted the sample to the laboratory on the same day for fluoride analysis. The
22 laboratory analyzed the sample for fluoride and issued a report dated September 17,
23 2014 showing a fluoride sample result of 2.3 mg/L for Well 09. No additional fluoride
24 samples were reported for Well 09 for third quarter 2014. The RAA calculated from this
25 result, and the preceding three quarterly average results, 2.3, 2.1 and 2.0, is 2.2 mg/L,
26 which exceeds the fluoride MCL of 2.0 mg/L.

Table 1 – Fluoride Results and Compliance Calculations for Well 09

| Quarter | Date Sampled | Result (mg/L) | Quarterly Average (mg/L) | Running Annual Average (mg/L) |
|--------------------------|--------------|---------------|--------------------------|-------------------------------|
| 1 st Q 2010 | 3/22/2010 | 2.1 | 2.1 | |
| 1 st Q 2011 | 1/12/2011 | 1.3 | 1.3 | |
| 2 nd Q 2011 | 6/6/2011 | 2.1 | 2.1 | |
| | 6/15/2011 | 2.0 | | |
| 3 rd Q 2011 | 9/12/2011 | 2.3 | 2.2 | |
| | 9/26/2011 | 2.2 | | |
| | 9/30/2011 | 2.2 | | |
| 4 th Q 2011 | 12/19/2011 | 2.0 | 2.0 | 1.9 |
| 1 st Q 2012 | 3/9/2012 | 1.9 | 1.9 | 2.0 |
| 2 nd Q 2012 | 6/19/2012 | 2.0 | 2.0 | 2.0 |
| 3 rd Q 2012 | 9/19/2012 | 1.6 | 1.6 | 1.9 |
| 4 th Q 2012 | 12/10/2012 | 1.2 | 1.2 | 1.7 |
| 1 st Q 2013 | 3/18/2013 | 1.2 | 1.2 | 1.5 |
| 2 nd Q 2013 | 4/3/2013 | 1.5 | 1.8 | 1.5 |
| | 6/11/2013 | 2.1 | | |
| 3 rd Q 2013 * | 9/9/2013 | 1.9 | 1.9 | 1.5 |
| 4 th Q 2013 * | 12/16/2013 | 2.2 | 2.0 | 1.7 |
| | 12/20/2013 | 1.8 | | |
| 1 st Q 2014 * | 3/11/2014 | 2.1 | 2.1 | 2.0 |
| 2 nd Q 2014 * | 6/9/2014 | 2.3 | 2.3 | 2.1 |
| 3 rd Q 2014 * | 9/8/2014 | 2.3 | 2.3 | 2.2 |

* The laboratory reports for these results are included in Attachment No. 1

1 Well 09 is the only SMWC well that produces water with fluoride concentrations that
2 exceed the fluoride MCL. The other seven wells operated by SMWC produce water
3 with lower fluoride concentrations. The historical fluoride concentrations reported for
4 each of SMWC's wells are shown in the chart in Attachment No. 2. Well 09 currently
5 pumps into a 12-inch diameter distribution system pipeline at the western extremity of
6 the water system. Wells 16 and 11, which are located about 1,000 feet and 2,000 feet
7 to the east of Well 09, respectively, also pump into the same 12-inch diameter
8 distribution system pipeline. When Well 16 and/or Well 11 are operating concurrently
9 with Well 09, the water produced by these wells would blend with water produced by
10 Well 09, thus decreasing the fluoride concentration below the fluoride MCL at the
11 customer service connection. However, depending on the operation of the wells and
12 the hydraulics of the distribution system, there may be some customer service
13 connections in Pressure Zone 3 that are served water produced by Well 09 exclusively.
14

15 The Division discussed fluoride compliance of Well 09 with SMWC in a December 12,
16 2011 sanitary survey letter, including possible compliance options available to SMWC,
17 such as providing blending treatment or obtaining a fluoride variance pursuant to Title
18 22, Section 116430. SMWC must provide feedback to the Division at this time on the
19 direction it plans to take to comply with the fluoride MCL, and submit the necessary
20 information to the Division, including the description of the project, a schedule for
21 completion of the project, the technical plans and drawings related to the project, a
22 permit amendment application, and an operations and monitoring plan, and whether
23 Well 09 will be shut down in the interim.
24

25 No enforcement actions were previously issued to this system for a similar violation.
26
27

1 **DETERMINATION**

2 The Division has determined that SMWC failed to comply with the Maximum
3 Contaminant Level (MCL) for fluoride at Well 09, for second quarter 2014 and third
4 quarter 2014. For a public water system monitoring quarterly, the running annual
5 average (RAA), computed quarterly, shall not exceed the fluoride MCL of 2.0 mg/L. The
6 RAA for second quarter 2014 was 2.1 mg/L at Well 09 and the RAA for third quarter
7 2014 was 2.2 mg/L at Well 09.

8
9 **DIRECTIVES**

10 SMWC is hereby directed to take the following actions:

- 11
- 12 1. Forthwith, SMWC shall cease and desist from failing to comply with the MCL for
13 fluoride.
 - 14
 - 15 2. Within 14 days of receipt of this Citation, SMWC shall provide written notification to
16 the customers in Pressure Zone 3, in conformance with Tier 2 public notification
17 requirements per Sections 64463.4 and 64465. The notification must be approved
18 by the Division prior to issuance. SMWC must distribute the notification via (1) mail
19 or direct delivery; and (2) publication in a local newspaper.
 - 20
 - 21 3. Within 30 days of receipt of this Citation, SMWC shall provide to the Division
22 certification of public notification using the enclosed form (Attachment No. 3).
 - 23
 - 24 4. Within 30 days of receipt of this Citation, SMWC shall submit a written response to
25 the Division indicating its willingness to comply with directives of this Citation.
26
27

- 1 5. Within 30 days of receipt of this Citation, SMWC shall submit a proposed plan to
2 maintain compliance with the fluoride MCL.
3
- 4 6. Within 60 days of receipt of this Citation, SMWC shall submit a plan to the Division,
5 including the description of the project, a schedule for completion of the project, the
6 technical plans and drawings related to the project, a permit amendment
7 application, and an operations and monitoring plan.
8
- 9 7. SMWC shall include information regarding the fluoride MCL violation in the 2014
10 Consumer Confidence Report, which must be completed and distributed to all
11 customers by July 1, 2015. A draft of the 2014 Consumer Confidence Report shall
12 be submitted to the Division for review and approval prior to distribution.
13

14 The Division reserves the right to make such modifications to this Citation as it may
15 deem necessary to protect public health and safety. Such modifications may be issued
16 as amendments to this Citation, and shall be deemed effective upon issuance.
17

18 Nothing in this Citation relieves SMWC of its obligation to meet the requirements of the
19 California Safe Drinking Water Act, or of any regulation, permit, standard, or order
20 issued or adopted thereunder.
21

22 All submittals required by this Citation shall be submitted to the Division at the following
23 address:

24 J. Steven Williams, P.E.
25 District Engineer
26 State Water Resources Control Board
27 Division of Drinking Water
1350 Front Street, Room 2050
San Diego, CA 92101

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Attachments:

- 1. Well 09 fluoride laboratory reports, 3rd Quarter 2013 to present
- 2. Historical fluoride concentrations, all wells
- 3. Proof of Notification Form

cc: County of Riverside, Department of Environmental Health

Attachment No. 1

Clinical Laboratory of San Bernardino, Inc.



STATE OF CALIFORNIA
DEPT. OF PUBLIC HEALTH

5/17

| | | | |
|--|--|-------------|---|
| South Mesa Water Co P.O Box 458 Calimesa CA, 92320 | Project: Quarterly Fluoride Sub Project: Project Manager: Dave Armstrong | SEP 29 2014 | Work Order: 14I0605 Received: 09/08/14 11:05 Reported: 09/17/14 |
|--|--|-------------|---|

| Well #9 | 14I0605-01 (Water) | Sample Date: 09/08/14 9:45 | Sampler: Jeff Jones | | | | | | |
|----------------|---------------------------|-----------------------------------|----------------------------|------------|-----|----------|----------|-------|-----------|
| Analyte | Method | Result | Units | Rep. Limit | MCL | Prepared | Analyzed | Batch | Qualifier |

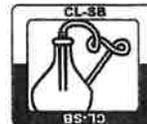
General Chemical Analyses

| | | | | | | | | | |
|---------------------|--|------------|------|------|---|----------|----------|---------|--|
| Fluoride (F) | EPA 300.0 | 2.3 | mg/L | 0.10 | 2 | 09/15/14 | 09/16/14 | 1438047 | |
| ND | Analyte NOT DETECTED at or above the reporting limit | | | | | | | | |

Stu Styles
Client Services Manager

Clinical Laboratory of San Bernardino, Inc.

EDT Transfer Confirmation 1



Page 1 of 1

Work Order: 14I0605
Report Date: 09/17/2014
Analyzing Lab: Clinical Laboratory of San Bernardino, Inc. ELAP 1088

SOUTH MESA WC

User ID: WAT

System: 3310017

WELL 09

Station No.: 3310017-008

Sampled: 140908 09:45

FLUORIDE (F) NATURAL - SOURCE

Result: 2.3

Units: MG/L

Entry No.: 00951

Analyzed: 140916

Clinical Laboratory of San Bernardino, Inc.



| | | |
|--|---|---|
| South Mesa Water Co P.O Box 458 Calimesa CA, 92320 | Project: Quarterly Fluoride Sub Project: Q2 Project Manager: Dave Armstrong | Work Order: 14F0707 Received: 06/09/14 14:35 Reported: 06/12/14 |
|--|---|---|

| Well #9 | 14F0707-01 (Water) | Sample Date: 06/09/14 14:00 | Sampler: Jeff Jones | | | | | | |
|----------------|---------------------------|------------------------------------|----------------------------|------------|-----|----------|----------|-------|-----------|
| Analyte | Method | Result | Units | Rep. Limit | MCL | Prepared | Analyzed | Batch | Qualifier |

General Chemical Analyses

| | | | | | | | | | |
|---------------------|--|-----|------|------|---|----------|----------|---------|--|
| Fluoride (F) | EPA 300.0 | 2.3 | mg/L | 0.10 | 2 | 06/09/14 | 06/09/14 | 1424026 | |
| ND | Analyte NOT DETECTED at or above the reporting limit | | | | | | | | |

Stu Styles
Client Services Manager

Clinical Laboratory of San Bernardino, Inc.

EDT Transfer Confirmation 1



Page 1 of 1

Work Order: 14F0707

Report Date: 07/16/2014

Analyzing Lab: Clinical Laboratory of San Bernardino, Inc. ELAP 1088

SOUTH MESA WC

User ID: WAT

System: 3310017

WELL 09

Station No.: 3310017-008

Sampled: 140609 14:00

FLUORIDE (F) NATURAL - SOURCE

Result: 2.3

Units: MG/L

Entry No.: 00951

Analyzed: 140609

Printed: 07/16/2014 02:47:21 PM Results of 14F0707 FINAL WRITEON 3310017-008
Post Office Box 329 San Bernardino, CA 92402 (909) 825-7693 Fax (909) 825-7696 ELAP Number 1088

Clinical Laboratory of San Bernardino, Inc.

EDT Transfer Confirmation 1



Page 1 of 1

Work Order: 14C0809
Report Date: 03/24/2014
Analyzing Lab: Clinical Laboratory of San Bernardino, Inc. ELAP 1088

| | | | | |
|-------------------------------|--------------------------|-----------------------|------------------|------------------|
| SOUTH MESA WC | User ID: WAT | System: 3310017 | | |
| WELL 09 | Station No.: 3310017-008 | Sampled: 140311 11:00 | | |
| FLUORIDE (F) NATURAL - SOURCE | Result: 2.1 | Units: MG/L | Entry No.: 00951 | Analyzed: 140314 |

Printed: 03/24/2014 12:29:20 PM Results of 14C0809 FINAL WRITEON 3310017-008

Post Office Box 329 San Bernardino, CA 92402 (909) 825-7693 Fax (909) 825-7696 ELAP Number 1088



Clinical Laboratory of San Bernardino, Inc. CHAIN OF CUSTODY

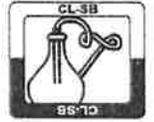
PAGE

140809

| | | | |
|---|-------------|---|---------------|
| CLIENT: South Mesa Water Co. Address: 391 W. Ave. L Calimesa Ca. 92520 System Number: 3510017 Phone No.: 909 795-2400/Fax No.: Project Name: Quater 1 Fluoride Sampled By: Jeff Jones Comments: Call with results 957-396-6153 | | CLIENT JOB NUMBER | |
| DESTINATION LABORATORY (Company Use Only) <input checked="" type="checkbox"/> CLINICAL LABORATORY OF SAN BERNARDINO, INC. (909) 825-7693 <input type="checkbox"/> OTHER | | ANALYSIS REQUESTED | |
| PRESERVATIVES | | Fluoride | |
| DATE | TIME | SAMPLE IDENTIFICATION | MATRIX |
| 3/1/74 | 11:00 | Well # 9 | 12 |
| PRESERVATIVES: (1) Na ₂ S ₂ O ₃ (2) HNO ₃ /HCl (4) | | TURN AROUND TIME: (10) 10 DAY (5) 5 DAY RUSH SOME ANALYSES MAY TAKE LONGER THAN CHOSEN TIME DUE TO METHOD LIMITATIONS. | |
| RELINQUISHED BY (SIGN) | | RECEIVED BY (SIGN) | |
| [Signature] | | [Signature] | |
| PRINT NAME / COMPANY | | PRINT NAME / COMPANY | |
| Jeff Jones / SMC | | U.S.B. | |
| DATE / TIME | | DATE / TIME | |
| 3-1-74 | | 11-14-74 | |
| RECD AT LAB BY: | | CONDITIONS / COMMENTS | |
| [Signature] | | 17.7. | |
| SHIPPED VIA | | <input type="checkbox"/> CLIENT <input type="checkbox"/> GREYHOUND <input type="checkbox"/> GOLDEN STATE <input type="checkbox"/> OTHER | |
| <input type="checkbox"/> FED X | | | |

Clinical Laboratory of San Bernardino, Inc.

EDT Transfer Confirmation 1



Page 1 of 1

Work Order: 13L1671
Report Date: 12/27/2013
Analyzing Lab: Clinical Laboratory of San Bernardino, Inc. ELAP 1088

| | | | | |
|-------------------------------|--------------------------|-----------------------|------------------|------------------|
| SOUTH MESA WC | User ID: WAT | System: 3310017 | | |
| WELL 09 | Station No.: 3310017-008 | Sampled: 131220 09:35 | | |
| FLUORIDE (F) NATURAL - SOURCE | Result: 1.8 | Units: MG/L | Entry No.: 00951 | Analyzed: 131220 |



| | | | |
|--|--|---|--|
| CLIENT: South Mesa Water Co. | | ANALYSIS REQUESTED | |
| Address: 391 West Ave. L | | Fluoride | |
| Calimesa, CA 92320 | | | |
| System Number: 3310017 | | | |
| Phone No.: (909) 795-2401 (Fax No.: | | | |
| Project Name: Q4 Fluoride | | | |
| Sampled By: Chris Mercer | | | |
| Comments: Call with results | | | |
| CLIENT JOB NUMBER | | PRESERVATIVES | |
| (Company Use Only) | | Fluoride | |
| DESTINATION LABORATORY | | MATRIX | |
| <input checked="" type="checkbox"/> CLINICAL LABORATORY OF SAN BERNARDINO, INC. (909) 825-7693 | | Well # 9 | |
| <input type="checkbox"/> OTHER | | NUMBER OF CONTAINERS | |
| | | 1 | |
| DATE | | TURN AROUND TIME | |
| 12/20 9:35 | | (1) 10 DAY (5) 5 DAY RUSH (2) 2 DAY RUSH | |
| | | ALL TURN AROUND TIMES ARE EXPRESSED AS WORKING DAYS. | |
| | | SOME ANALYSES MAY TAKE LONGER THAN CHOSEN TIME DUE TO METHOD LIMITATIONS. | |
| SAMPLE IDENTIFICATION | | RECEIVED BY (SIGN) | |
| | | Chris Mercer / SMC 12-20-13 1007 | |
| | | Chris Mercer | |
| | | C-59 | |
| DATE / TIME | | PRINT NAME / COMPANY | |
| 12-20-13 1007 | | Chris Mercer / SMC | |
| RECD AT LAB BY: | | CONDITIONS / COMMENTS: | |
| Chris Mercer | | 12/20/13 | |
| SHIPPED VIA | | OTHER | |
| <input type="checkbox"/> FED X | | <input type="checkbox"/> OTHER | |
| <input type="checkbox"/> GOLDEN STATE | | <input type="checkbox"/> GREYHOUND | |
| <input type="checkbox"/> CLIENT | | | |

Clinical Laboratory of San Bernardino, Inc.
EDT Transfer Confirmation 1



Page 1 of 1

Work Order: 13L1198
Report Date: 12/18/2013
Analyzing Lab: Clinical Laboratory of San Bernardino, Inc. ELAP 1088

| | | | | |
|-------------------------------|--------------------------|-----------------------|------------------|------------------|
| SOUTH MESA WC | User ID: WAT | System: 3310017 | | |
| WELL 09 | Station No.: 3310017-008 | Sampled: 131216 09:10 | | |
| FLUORIDE (F) NATURAL - SOURCE | Result: 2.2 | Units: MG/L | Entry No.: 00951 | Analyzed: 131216 |



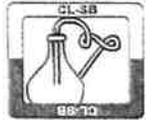
Clinical Laboratory of San Bernardino, Inc. CHAIN OF CUSTODY

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| | | | | | |
|--|---|---|---------------------------|------------------------------|--------------------------------|
| CLIENT: South Mesa Water Co Address: 397 W Ave L Calimesa, CA 92570 System Number: 33/0017 Phone No.: 951-795-2401 Fax No.: Project Name: Q4 Fluoride Sampled By: Jeff Jones Comments: Call 951-393-6153 with Results | | CLIENT JOB NUMBER (Company Use Only) DESTINATION LABORATORY <input checked="" type="checkbox"/> CLINICAL LABORATORY OF SAN BERNARDINO, INC. (909) 825-7693 <input type="checkbox"/> OTHER | PRESERVATIVES Fluoride | ANALYSIS REQUESTED | TURN AROUND TIME |
| DATE TIME 12/16/13 9:10 AM Cell #9 | SAMPLE IDENTIFICATION Cell #9 | MATRIX 4 | NUMBER OF CONTAINERS 4 | PREPARED BY (SIGN) | RECEIVED BY (SIGN) |
| PREPARED BY (SIGN) | PRINT NAME / COMPANY Jeff Jones / S.M.W.C. | DATE / TIME 12-16-13 10:04 AM | RECEIVED BY (SIGN) | PRINT NAME / COMPANY C-50 | CONDITIONS / COMMENTS: None |
| PREPARED BY (SIGN) | PRINT NAME / COMPANY Jeff Jones / S.M.W.C. | DATE / TIME 12-16-13 10:04 AM | RECEIVED BY (SIGN) | PRINT NAME / COMPANY C-50 | CONDITIONS / COMMENTS: None |
| PREPARED BY (SIGN) | PRINT NAME / COMPANY Jeff Jones / S.M.W.C. | DATE / TIME 12-16-13 10:04 AM | RECEIVED BY (SIGN) | PRINT NAME / COMPANY C-50 | CONDITIONS / COMMENTS: None |

Clinical Laboratory of San Bernardino, Inc.

EDT Transfer Confirmation 1



Page 1 of 1

Work Order: 13I0569
Report Date: 09/16/2013
Analyzing Lab: Clinical Laboratory of San Bernardino, Inc. ELAP 1088

SOUTH MESA WC

User ID: WAT

System: 3310017

WELL 09

Station No.: 3310017-008

Sampled: 130909 10:45

FLUORIDE (F) NATURAL - SOURCE

Result: 1.9

Units: MG/L

Entry No.: 00951

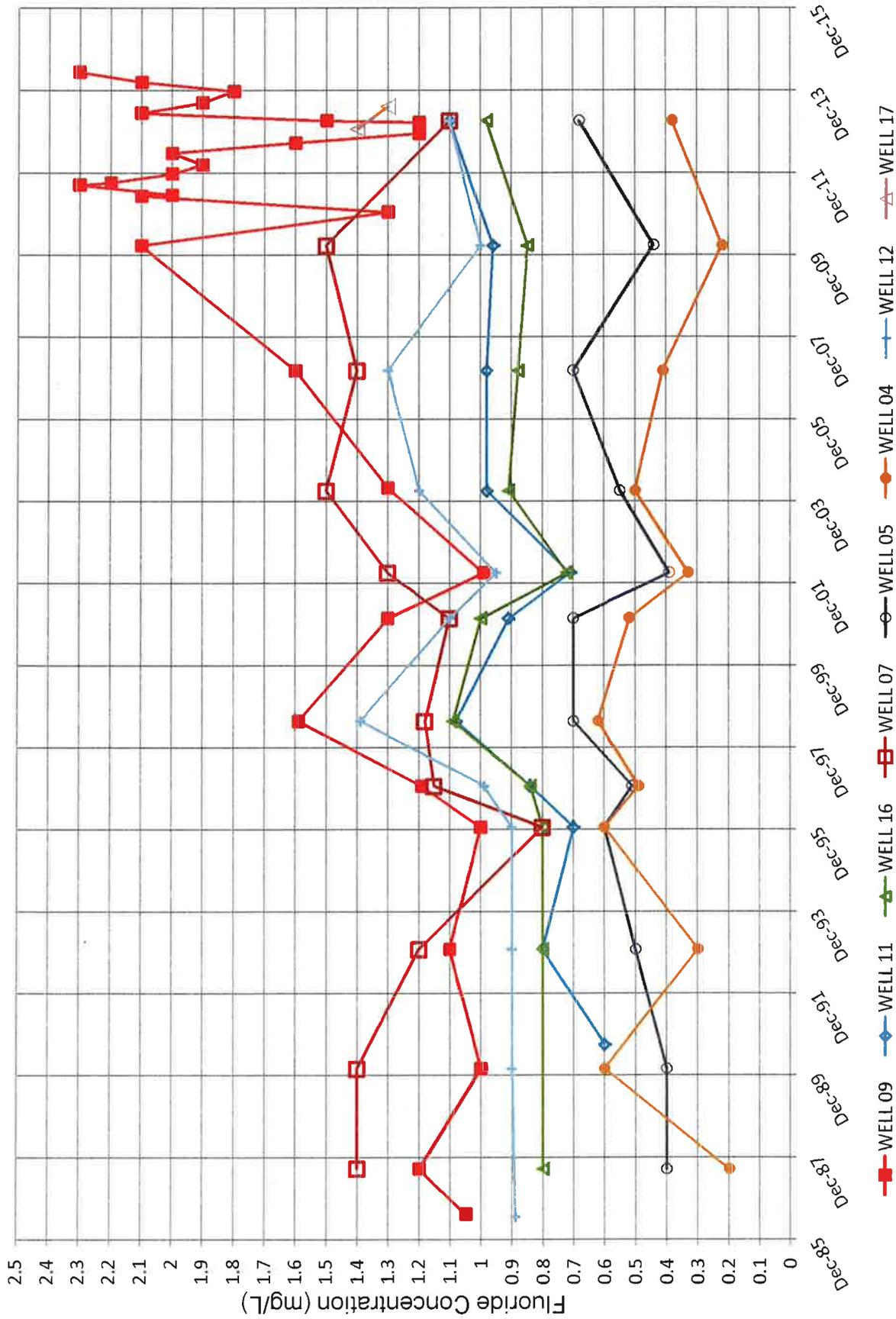
Analyzed: 130909

Printed: 09/16/2013 09:40:56 AM Results of 13I0569 FINAL WRITEON 3310017-008

Post Office Box 329 San Bernardino, CA 92402 (909) 825-7693 Fax (909) 825-7696 ELAP Number 1088

Attachment No. 2

South Mesa Water Company Historical Fluoride Levels - All Wells



Attachment No. 3

Drinking Water Notification to Consumers

PROOF OF NOTIFICATION

Name of Water System: _____

Please explain what caused the problem if you have determined what it was and what steps you have taken to correct it. _____

Consumers Notified _____ Yes _____ No

If not, Explain: _____

Date of Notification: _____

On the date of notification set forth above, I served the above referenced document(s) on the consumers by:

_____ Sending a copy through the U.S. Mail, first class, postage prepaid, addressed to each of the resident(s) at the place where the property is situated, pursuant to the California Civil Code. Attach copy of Notice.

_____ Newspaper (if the problem has been corrected). Attach a copy of Notice.

_____ Personally hand-delivering a copy to each of the consumers. Attach a copy of Notice.

_____ Posted on a public bulletin board, that will be seen by each of the consumers (for small, non-community water systems with prior Division approval). Attach copy of Notice.

I hereby declare the forgoing to be true and correct under penalty of perjury.

Dated: _____

Signature of Person Serving Notice

**** Notice:** Complete this Proof of Notification and return it along with a copy of the notification to the Division within 30 days of receipt of your order.

Disclosure: Be advised that the California Health and Safety Code states that any person who knowingly makes a 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 each separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by fine of not more than twenty-five thousand dollars (\$25,000) for each day of violation, or be imprisoned in county jail not to exceed one year or by both the fine and imprisonment.