Third-Party Designation Letter Template

The below template letter may be used for designating a third-party personal to submit documentation or compliance information on the behalf of a water system or licensed operator of record. It must be written, signed, and submitted by the applicable water system/licensed operator of record. A separate letter must be sent by each responsible party for each designated third-party.

This letter must include the following:

* Name of water system and PWSID
* Date of submittal
* Name of third-party submitter
* Third-party affiliation
* Third-party contact information
* Date the third-party designation expires. (e.g., can be the end date of a contract). It is the water system or licensed operator of records responsibility to inform the Department in writing if this date is to be ended or extended at any time.
* Information the third-party may submit on your behalf

Failure to submit a letter containing all the required information will result in denial of third-party submissions.

As a reminder, the water system and licensed operator of record remain the responsible parties under the Federal and New Jersey Safe Drinking Water Acts. Designation of a third-party does not exempt you from regulatory requirements, violations, enforcement actions, and penalties.

LETTERHEAD IF APPLICABLE

DATE

Dear Water Systems Operation Element,

I am submitting a request for a third-party representative to submit documentation and/or compliance information on my behalf. I am designating NAME OF THIRD PARTY, of NAME OF AFFILIATION to submit specifically NATURE OF ALL DOCUMENTATION on my behalf for WATER SYSTEM NAME, PWSID from START DATE until END DATE.

NAME OF THIRD PARTY may be contacted at PHONE NUMBER and EMAIL ADDRESS.

With this request I understand that I; the supplier of water as defined under N.J.A.C. 7:10-1.3, am still the responsible party; and therefore, subject to all applicable State and Federal requirements. I will be included in all decisions regarding the water system and correspondence sent to the Element and will provide my original signature to all documentation and forms as applicable.

Thank you,

NAME OF SUPPLIER OF WATER

LICENSED NUMBER IF APPLICABLE

SIGNATURE