**DEP\_10-F\_0051.1**

NJDEP, Monitoring and Reporting Violation PN, 09/2024

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

**Monitoring and Reporting Requirements Not Met for [Water System].**

Our water system violated drinking water requirements over the past year. Even though it is not an emergency, as our customers, you have a right to know what happened and what we are [doing or did] to correct the situation(s).

**Repeat the above statement and** “For more information, please contact [name of contact] at [phone number] or [mailing address].” **in all languages predominantly spoken (10% or more of a population within a municipality based on US Census data) in the service area.**

We are required to monitor your drinking water for specific contaminants on a regular basis. Results of regular monitoring are an indicator of whether our drinking water meets health standards. During [compliance period] we [did not monitor or test **or** did not complete all monitoring or testing **or if results were submitted late and returned to compliance** we completed all monitoring and testing; however, the results were submitted to the state late (more than 10 days from the end of the monitoring period)] for [contaminant(s)]. Therefore, we cannot be sure of the quality of your drinking water during that time.

The table below lists the contaminant(s) we did not properly monitor and report during the last year, how often and when we are supposed to sample, how many samples we are required to collect, how many samples we took, and if applicable, the date on which follow-up samples were (or will be) taken.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Analyte | Required sampling frequency or sampling period | Number of samples required | Number of samples collected | When samples were or will be taken |
|  |  |  |  |  |
|  |  |  |  |  |

What should I do?

There is nothing you need to do.

However, if you have specific health concerns, a severely compromised immune system, have an infant, are pregnant, or are elderly, you may be at higher risk than other individuals and should seek advice from your health care providers about drinking this water.

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 notice in a public place or distributing copies by hand or mail.\**

This notice is being sent to you by [Water System Name], Water System ID#: NJ[XXXXXXX].

Date distributed: \_\_\_\_\_\_.