



County of Sacramento

**SMALL WATER SYSTEM
REQUEST FOR RECLASSIFICATION
AND CERTIFICATION**

Water System Name: _____ LPA Number: 3400 _____

Pursuant to Section 116275 of the California Health and Safety Code (CHSC), I request that the Sacramento County Environmental Management Department (EMD) reclassify the above named water system based upon the information provided below. My water system is currently classified as a (check appropriate boxes to determine classification and compliance):

- Community Water System (Serves at 15 service connections used by yearlong residences or regularly serves at least 25 yearlong residents)
- Non-Transient noncommunity Water System (is not a community water system and regularly serves at least the same 25 persons over 6 months per year)
- Transient-noncommunity Water System (is not a community water system or nontransient-noncommunity water and serves 25 persons 60 days a year)
- State Small Water System (a system that provides water for human consumption that serves 5 to 14 service connections and does not serve drinking water to an average of 25 individuals daily for more than 60 days a year)

Please fill in each blank to provide EMD with enough information to consider the re-classification of your water system. EMD will evaluate the information provided and notify the water system of its decision. An inspection may be needed to complete the evaluation.

1. Number of service connections: _____
2. Number of service connections that serve yearlong residents: _____
3. The number of yearlong residences : _____
4. The number of same people served 6 months of the year (include all employees, students): _____
5. The number of other people served daily that are not defined in #3 and #4: _____
 - 5.a The average number of people served daily is: _____
 - 5.b The peak number of people served during any day is: _____
 - 5.c The average number of people served in a month is: _____
 - 5.d The peak number of people served in a month is : _____

The water system **does not** provide water to more than 25 people 60 days a year. Therefore, the water system is not a public water system. Yes

CERTIFICATION

I certify that I understand that Section 116725 of the CHSC states that “any person who knowingly makes any false statement or representation in any application, record, report, or other document submitted, maintained, or used for purposed of compliance with the CHSC, may be liable for a civil penalty not to exceed five thousand (\$5,000) for each separate violation, or for continuing violations, for each day that violation continues.” In addition, Section 116730 of the CHSC states that 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 by imprisonment in the county jail not to exceed one year, or by both the fine and imprisonment.

I certify that the above information provided by the water system is true and correct to the best of my knowledge. I also certify that I am authorized by water system to submit this request for reclassification and certification:

(Signature of Water System Representative)

Date

Print Name

Title

Contact Phone Number