

Massachusetts Department of Environmental Protection
Bureau of Water Resources – Drinking Water Program
Lead & Copper Rule Revisions (LCRR) – Certification of Service Line Inventory
Consumers Notice

LCRR
SLI-CN

Important:
 When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



A. PWS Information

Monument Mountain Regional High School
 PWS Name
Great Barrington 1113016 ☐ COM ☒ NTNC
 City/Town PWS ID#

Select the number of service line connections with the following classifications from your service line inventory:

☐ Total Number of Lead service lines _____ ☐ N/A
☐ Total Number of Galvanized Requiring Replacement service lines _____ ☐ N/A
☒ Total Number of Unknown Service lines 5 ☐ N/A

B. Community Water Systems: Notification Timeline Table

Fill in the table below with the dates the notification was delivered to the consumer(s) at the service connection, and whether the consumer notification was made within 30 days of submitting your service line inventory. In the column #3 please indicate whether the notification was for homeowners (H), residents/occupants in single family units (renters) and homeowners of the property, if the homeowner has provided a different address (RH), or building complexes (BC) including educational campuses, schools, multifamily buildings, hospitals, among others.

Instructions

COM:
 fill out sections A and B, D, E, and F.
NTNC:
 Fill out sections A C, D, E and F.

Submit this form to the Drinking Water Program at program.director-dwp@mass.gov by July 1 of 2025, and July 1 of each subsequent year.

Questions:
 Contact program.director-dwp@mass.gov or 617-292-5770.

1 Insert Type of Notice: LSL, GRR or Unknown	2 Number of Notices Delivered	3 Type of Service Connection Customer: Resident (H), Resident and Homeowners (RH) or Building Complex (BC)	4 Date of Consumer Notification Delivery	5 Consumer Notification was Made Within 30 days After October 16. (Y/N)

Delivery Method:

- ☐ a. My system notified consumers using the following method(s):
☐ U.S. Mail ☐ Hand/direct delivery ☐ Email (requires prior MassDEP approval)
☐ Other (requires prior MassDEP approval) _____
- ☐ b. My system notified building complexes using the following method(s) (if applicable):
☐ U.S. Mail ☐ Hand/direct delivery ☐ Posting on conspicuous places in each building

If notices were delivered to the facility manager or other representative of the complex(s):

- ☐ My notice(s) included the following:
- clear delivery instructions for the representative person that the notices must be posted in each building or delivered to each consumer in each building,
 - contact information for my system, and

- a request for the representative person to notify my system when the notice is posted and/or delivered.
- My system received confirmation from the representative person(s) that the notices were posted in each building or delivered to each consumer in each building.

C. NTNC Water Systems: Notification Timeline Table

Fill in the table below with the dates the notification(s) were delivered to the consumer, and whether the consumer notification was made within 30 days.

Insert Type of Notice: LSL, GRR or Unknown	Date of Consumer Notification Delivery	Consumer Notification was Made Within 30 Days (Y/N)
Unknown	6.13.25	No

Delivery Method: All NTNC (choose a or b); NTNC Schools (item c is also required)

- ☐ a. My system is a NTNC and posted the consumer notice within the facility. The notice will remain posted until the service line(s) no longer meet(s) the classification selected above.
- ☐ b. My system is a NTNC and notified consumers by direct hand/delivery.
- ☐ c. My system is also a school/early education & care facility and utilized one or both of the following methods for consumer notification.
- ☐ Consumer notification was sent home with each student/child.
- ☒ Consumer notification was posted on the facility website. (provide url:)

D. Consumer Delivery Requirements:

Mandatory criteria for all consumer notification (check the boxes to certify which actions have been completed).

The water system named above certifies that the following information were provided to all consumers, including residents, homeowners, and building complexes within 30 days of submitting the service line inventory:

- ☐ The notification included information about the material makeup of the service line (lead, galvanized requiring replacement as defined in 40 CFR 141.84(a)(4), or an unknown material).
- ☐ An explanation of the health effects of lead and steps a person can take to reduce lead exposure.
- ☐ Information about the opportunities to replace lead or galvanized service lines (if applicable).
- ☒ Information about opportunities to verify the material of the service line.

The water system named above certifies that consumer notifications were provided in the following additional circumstances:

When applicable, consumer notices were distributed to new customers in buildings served by lead, galvanized requiring replacement, or unknown service lines and were provided at the initiation of service, meeting the criteria described in 141.85(e)(2).

E. Mandatory Agency Delivery Requirements:

Mandatory criteria for all PWSs (check the boxes to certify which actions have been completed).
PWS has:


- ☒ Completed this form.
- ☒ Attached as an example(s) of the consumer notification that was delivered via the method(s) certified in Section B or C. The examples must be one of the dated notifications that was actually delivered, not a blank template form. For systems that are notifying both residential customers and building complexes, an example of each must be provided.

F. Certification:

I certify that I am authorized to fill out and submit this form to the Massachusetts Department of Environmental Protection and I certify under penalties of law that the information contained herein is true, accurate, and complete to the best of my knowledge and belief and *that the service line inventory consumer notice(s) for the public water system has been sent to the following:*

Check applicable:

- ☐ Residents ☐ NTNC and Schools/Early Education & Care Facilities that are NTNC

Name	<u>Peter Carlotto</u>	Title	<u>Maintenance</u>
Signature	<u></u>	Date	<u>6.11.25</u>
		Phone Number	<u>413.644.0276</u>

Please note: Incomplete submittal, failure to submit this Certification Form, or failure to deliver the Consumer Notice as required is a violation of federal requirement 40 CFR 141.85(e), 40 CFR 141.90(e)(13), and 40 CFR 141.90(f)(4).

MassDEP Use Only

APPROVAL STATUS

MASSDEP DWP STAFF REVIEWER FULL NAME

REVIEW DATE