**U.S. ENVIRONMENTAL PROTECTION AGENCY, REGION 8**

**PERMANENT SEASONAL OPERATIONAL CHANGES  
TO A PUBLIC WATER SYSTEM**



Submit form to Region 8 Drinking Water Partnerships and Data Section

Email: [R8DWU@epa.gov](mailto:R8DWU@epa.gov)

Mail: U.S. Environmental Protection Agency, Region 8

Mail code: 8WD-SDP

1595 Wynkoop Street

Denver, Colorado 80202

Attn: Inventory Team

Fax: 303-312-7517

If you have questions, please contact Angela Mendrala at [mendrala.angela@epa.gov](mailto:mendrala.angela@epa.gov), 1-800-227-8917, ext. 312-6533, or directly at 303-312-6533.

This form should be completed and submitted to the EPA, Region 8, when a Public Water System is making permanent changes to:

**SEASON THEY ARE SERVING WATER TO THE PUBLIC**

Please submit the completed form **at least 60 days BEFORE a permanent change to the season is made so that the EPA may notify you of any applicable changes to your monitoring or regulatory requirements for the Revised Total Coliform Rule and Surface Water Treatment Rule.** If your opening date is dependent on the snowpack and may fluctuate, please report projected population served per day for the first possible date you have historically opened (use that as your projected opening month.)

PWS Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PWS ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Seasonal Information**: On average, what months would the system be serving water to people to include employees, public users, and residents? (*For example, 5/15 to 9/15*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please complete the table below** by estimating the number of people water is served. The following indicates the types of people served for use in completing the table.

**Resident** = A year-round resident whose residence is served by the system.

**Non-Transient** (Non-Resident Using on a Consistent Basis) = A person who is not a year-round resident but is provided water regularly for greater than 6 months per year. (*e.g., students, employees, etc*.)

**Transient** (**Non-Resident Using on a Varying Basis)** = A person to whom the system provides water for fewer than 6 months per year. (*e.g., visitors, seasonal employees, attendees, etc*.)

\*Please note that the words “Non-Transient” and “Transient” come from the U.S. EPA’s regulatory language and do not imply that these are persons experiencing homelessness.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Number of days**  Each Month Water is Provided | | **Number of people served daily** based on each population type summarized above | | |
| *Month* | *# of Days Water is provided to People* | ***Residents*** *(Year-Round Residents)* | ***Non-Resident using on a Consistent Basis*** *(Av. #Daily Users)\** | ***Non-Resident using on a Varying Basis*** *(Av. #Daily Users)* |
| January (31) |  |  |  |  |
| February (28) |  |  |  |  |
| March (31) |  |  |  |  |
| April (30) |  |  |  |  |
| May (31) |  |  |  |  |
| June (30) |  |  |  |  |
| July (31) |  |  |  |  |
| August (31) |  |  |  |  |
| September (30) |  |  |  |  |
| October (31) |  |  |  |  |
| November (30) |  |  |  |  |
| December (31) |  |  |  |  |

**\*** Indicate if these are the same people from month to month.

**CERTIFICATION:**

(There can be criminal sanctions for providing false, fictitious, or fraudulent statements or representations to the EPA.)

I, the owner or responsible party for the water facility named above, hereby certify that all statements provided above are true and accurate to the best of my knowledge. I am aware there can be criminal sanctions for knowingly or willfully providing materially false, fictitious, or fraudulent statements or representations to the EPA.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name |  | Title |
|  |  |  |
|  |  |  |
| Phone |  | Email |
|  |  |  |
|  |  |  |
| Signature |  | Date |