



**NEW JERSEY DEPARTMENT
OF ENVIRONMENTAL PROTECTION
BUREAU OF SAFE DRINKING WATER
IMPLEMENTATION**

**REPRESENTATIVE SOURCE WATER MONITORING PLAN
CERTIFICATION**

Applicant:

PWSID No.:

Municipality/County:

We certify under penalty of law that we have personally examined and are familiar with the information in this submission and all attachments hereto, and that based on our inquiry of those individuals immediately responsible for obtaining the information, we believe that the submitted information is true, accurate and complete. We are aware that there are civil penalties and civil administrative penalties for falsification of any information submitted.

Signature of Engineer &
Embossed Seal

Signature of Water System
Licensed Operator

Name of Engineer &
New Jersey License Number

Name of Water System
Licensed Operator

Date

Date