

Ventura County Environmental Health Division 800 S. Victoria Ave., Ventura CA 93009-1730 TELEPHONE: 805/654-2813 or FAX: 805/654-2480 https://vcrma.org/divisions/environmental-health

## WATER SUPPLY CERTIFICATE - FOR SUBDIVISIONS

## PLEASE ALLOW A MINIMUM OF 2 FULL BUSINESS DAYS FOR PROCESSING

	TO BE	FILLED OUT BY APPLICANT	
1.	Project Number:	L MAP, PARCEL MAP WAIVER	
2.	Total number of water supply connections:	+	
3.	Assessor's Parcel Number:	existing proposed	
4.	Owner's/Applicant's Name:		
5.	Mailing Address:		
	Street	City	Zip
6.	Telephone:		

	TO BE FILLED OUT BY WATER PURVEYOR						
Date							
The							
	Water Purveyor received a request to provide domestic water to the total number of connections identified above.						
This	letter is to certify that:						
	The water purveyor holds an unrevoked permit to operate a public water system issued by the State of California Division of Drinking Water or the Ventura County Environmental Health Division;						
2. /	<ul> <li>As of this date, the water system conforms with:</li> <li>a. State Primary Drinking Water Standards as described in the California Code of Regulations (CCR), Title 22, Section 64421 et seq or see attached explanation, AND</li> <li>b. CCR, Title 22, Section 64560; AND</li> </ul>						
3.	a. The water purveyor has entered into a binding agreement with the property owner enforceable by the owner and the owner's successors in interest to the land, providing, on terms substantially the same as those given the water purveyor's customers generally, for the new connections described above. OR						
	b. The proposed parcel(s) will be served through an existing connection provided by the purveyor.						
By:							
-	DESIGNATED WATER PURVEYOR REPRESENTATIVE TITLE						

FOR OFFICE USE ONLY							
Received by:							
Date Recd.:	Amt. Recd.:	Approved	Denied				
Receipt No.:	Check No.:	Date:					
SR #:	PE #: 2665	EHD Specialist					
AR#:							