[Letter Head]

[Public Water System Name]

[Contact Person Name]

[Title]

[Address]

[Date]

SUBJECT: REQUEST OF LEAD SAMPLING AT [School Name] or [School District]

Dear [Contact Person],

I am writing on behalf [School Name] or [School District] to request lead sampling for our school or school district, which is served by [Public Water System Name]. I would like to request [Public Water System Name]’s assistance to develop a lead sampling plan and collect lead sample(s) at [School Name(s) (please list all individual schools)].

I acknowledge and understand the followings:

1. [School Name] or [School District] must submit a written request to [Public Water System Name] and [Public Water System Name] has to meet and collect lead samples for [School Name] or [School District] within 90 days or provide a lead sampling schedule to the local Division of Drinking Water District Office or Local Primacy Agency (LPA) Office if the lead sampling will take more than 90 days.

1. [Public Water System Name] will assist and provide a one-time lead sampling (up to five locations) without charge to [School Name] or [School District].
2. [Public Water System Name] will send the sample(s) to a laboratory certified by Environmental Laboratory Accreditation Program (ELAP) for lead analysis, and require the laboratory to submit the results to the State Water Resources Control Board (SWRCB) electronically. Also, [Public Water System Name] will provide the results to [School Name] or [School District].
3. [Public Water System Name] will discuss and provide assistance to the [School Name] or [School District] with interpretation of the samples and repeat sampling of any samples that exceed the lead action level of 15 parts per billion (ppb).
4. [Public Water System Name] is not responsible for any corrective action(s) in the event of lead sampling results above 15 ppb.
5. It is the responsibly of the [School Name] or [School District] to share the sampling results including but not limited to its School Board, School District, parents and students and/or other stakeholders. [Public Water System Name] cannot release the lead sampling data for 60 days following the receipt of the initial sampling results unless [Public Water System Name] receives a Public Records Act (PRA) for the specific results.

I would like to request a meeting with [Public Water System Name]’s staff or designated representative to discuss lead sampling for our school at your earliest convenience and I will provide adequate staff to assist your efforts. If you have any question, please contact me at [phone number] or my designee at [phone number].

Sincerely,

[Name]

[Superintendent or designee of a school, governing board or designee of a charter school, or administrator or designee of a private school]

[School name]

Cc: Electronically to

 DDW-PLU@waterboards.ca.gov

Or 1001 I Street, 17th Floor

Attn: Primacy Liaison Unit

Sacramento, CA  95618