

Notice of Reduced Lead Sampling

Schools, Private Schools and Day Nurseries
(O. Reg. 243/07 under Section 5 (2.1))

Instructions

Please complete this form and fax/email directly to:

Ministry of the Environment
Drinking Water Programs Branch

Fax: 416 314-8716

Email: Reg170_formsubmission.moe@ontario.ca

This form can also be found at:
www.ontario.ca/drinkingwater

Use this form to notify the ministry of reduced lead sampling under Section 5 (2.1) of O.Reg. 243/07.

If you require assistance in completing the form, please call 1 866 793-2588 (toll free).

Once this form is submitted, the ministry will only contact you about this notice if there are any questions or concerns with the information provided below.

Part A: Form Submission Information as per O.Reg. 243/07 under Section 5 (2.1) (please check)

This is my submission for O.Reg. 243/07 Notice of Reduced Lead Sampling to the Ministry. I confirm that for the facility listed below:

- Samples have been taken and tested for lead in accordance with the regulation and for at least 24 consecutive months;
- None of the test results from the most recent 24 consecutive months have exceeded the Ontario Drinking Water Quality Standard for lead of 0.010 mg/L;
- Every tap in the school, private school or day nursery that is used in the preparation of food or drink for consumption by children under 18 years of age has been sampled at least once;
- At least one tap from every washroom or change room where children under 18 years of age are allowed to fill drinking water bottles or containers has been sampled at least once.

Part B: Schools, Private Schools and Day Nurseries Information

Drinking Water Information System (DWIS) No.
Ministry assigned 9 digits number starting with "5".

Drinking Water System (DWS) No. – if applicable
Ministry assigned 9 digits number starting with "2". (Only for facility with its own source of drinking water.)

Name of School/Private School/Day Nursery

Name of Interested Authority (e.g., Ministry of Education or Ministry of Children and Youth Services)

Ministry of Education SFIS No.

Children and Youth Services Identification No.

Location of School/Private School/Day Nursery

Unit/Suite No.	Street No.	Street Name	Rural Route	Lot/Part/Block/Section
Concession/Plan		City/Town/Municipality	Province	Postal Code
Business Telephone No. (including area code)		Ext.	Fax No. (including area code)	

I declare that all information provided on this form is true and correct to the best of my knowledge.

Prepared by (print name)	Telephone No. (including area code)	Ext.
Signature	Date (yyyy/mm/dd)	

Collection of information on this form is collected by the Drinking Water Management Division on behalf of the Ministry of the Environment in accordance with the *Safe Drinking Water Act, 2002* (SDWA) and its regulations. The collection, use and dissemination of this information are governed by the *Freedom of Information and Protection of Privacy Act* (FOIPPA). The information gathered herein will be used for the purpose of notice of reduced lead sampling frequency, and may be used for secondary purposes including reporting, investigating and law enforcement under the SDWA and its regulations. Information contained on this form, including personal information, may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FOIPPA for the consistent purpose of administering programs related to drinking water safety.