

**BUREAU OF SAFE DRINKING WATER**

**PUBLIC WATER SYSTEM NAME / ADDRESS UPDATE FORM**

PWS NAME: \* PWS ID: \* PHYSICAL ADDRESS: \*

MAILING ADDRESS: \*

CITY: \* STATE: \* ZIP: \*

PWS NAME CHANGE TO:

PRIMARY CONTACT (All correspondence will be directed to this individual):

NAME: TELEPHONE: MAILING ADDRESS: EMERGENCY PHONE: CITY: STATE: ZIP: CELL PHONE:

E‐MAIL:

OWNER CONTACT: TELEPHONE: MAILING ADDRESS: EMERGENCY PHONE:

CITY: STATE: ZIP: CELL PHONE:

E‐MAIL:

IF OWNER IS A COMPANY, REPRESENTATIVE MUST BE AN INDIVIDUAL

OWNER REPRESENTATIVE: TELEPHONE: MAILING ADDRESS: EMERGENCY PHONE:

CITY: STATE: ZIP: CELL PHONE:

E‐MAIL:

OPERATOR IN RESPONSIBLE CHARGE (Monitoring and Violation info will also be directed to this individual): NAME: OP ID #: CERTIFICATION LEVEL:

NV CERTIFIED OPERATOR: ? YES  NO  SAME AS PRIMARY CONTACT: 

MAILING ADDRESS: TELEPHONE: CITY: STATE: ZIP: EMERGENCY PHONE: E‐MAIL: CELL PHONE:

SECONDARY – EMERGENCY CONTACT: TELEPHONE:

MAILING ADDRESS: EMERGENCY PHONE: CITY: STATE: ZIP: CELL PHONE:

E‐MAIL: NOTE: FOR ADDITIONAL OPERATORS INCLUDE SEPARATE SHEET

PERMIT FEE CONTACT: SAME AS PRIMARY CONTACT: 

MAILING ADDRESS: TELEPHONE: CITY: STATE: ZIP: EMERGENCY PHONE: E‐MAIL: CELL PHONE:

\*REQUIRED FIELD Carson City, NV 89701

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| Please return this form to: | Nevada Division of Environmental Protection | Fax #: | 775‐687‐5699 |
|  | Bureau of Safe Drinking Water | Email: | E‐[Data\_BSDW@ndep.nv.gov](mailto:Data_BSDW@ndep.nv.gov) |
|  | 901 S Stewart Street, Suite 4001 | Telephone: | 775‐687‐9521 |