



# COMMUNITY DEVELOPMENT SERVICES ENVIRONMENTAL MANAGEMENT DEPARTMENT

<http://www.edcgov.us/EMD/>

**PLACERVILLE OFFICE:**

2850 Fairlane Court  
Placerville, CA 95667  
(530) 621-5300  
(530) 642-1531 Fax

**LAKE TAHOE OFFICE:**

924 B Emerald Bay Rd.  
South Lake Tahoe, CA 96150  
(530) 573-3450  
(530) 542-3364 Fax

## WATER QUALITY EMERGENCY NOTIFICATION PLAN

System No. \_\_\_\_\_

Name of Water System: \_\_\_\_\_

Physical Location Address: \_\_\_\_\_

The following persons have been designated to implement the plan upon notification by the Division of Drinking Water and/or County of El Dorado that an imminent danger to the health of the water users exists:

Water System: Contact Name & Title	Email Address	Day	Telephone	
			Evening	Cell
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

The implementation of the plan will be carried out with the following Division of Drinking Water and County Health personnel:

Contact Name & Title	Telephone	
	Day	Evening
1. Karen Bender , Supervising R.E.H.S. El Dorado County, South Lake Tahoe, CA	(530) 573-3453	(530) 890-0243
2. Bryan Vyverberg , Supervising R.E.H.S. El Dorado County, Placerville, CA	(530) 573-5924	(800) 890-0243
3. Ali Rezvani, District Engineer Division of Drinking Water	(916) 445-5285	(800) 852-7550

**4. If the above personnel cannot be reached, contact:**

<b>Office of Emergency Services (24 Hrs.)</b> Ask for "Division of Drinking of Water, Duty Officer"	(800) 852-7550 or (916) 845-8911
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### NOTIFICATION PLAN

STANDARD PLAN: Please check if you agree to notify customers by door-to-door contact or written handout sheets. It is important that the people going door-to-door are coordinated and trained so they distribute copies to the designated areas of the water system. Maps of the specific areas that the notices are to be distributed should be provided to the customers.

ALTERNATE PLAN: Please check if you propose to use another method, and **attach** the alternate plan to this form.

Report prepared by:

\_\_\_\_\_  
Signature and Title

\_\_\_\_\_  
Date