Community Water Systems Boil Water Notice Checklist

This is a checklist that is designed to help Public Water System owners and operators comply with boil water notice requirements found in the Department of Health Boil Water Notice Guidelines, and Chapters 62-555 and 62-560, FAC.

____ Notify the affected customers within 24 hours (62-560.410(1)(a)1., FAC).
  o If it is a localized event, notify individual residences and establishments within the affected area via door-hangers or other means as appropriate.
  o If it is a large-scale event, call, e-mail, or fax the PBWN to the media serving the affected area.

The notice must contain (please see the recommended template for PBWNs: http://www.floridahealth.gov/environmental-health/drinking-water/attacha.pdf)

  • Water system name and contact information
  • A description of the incident, including the time and date it occurred
  • The specific geographic area affected
  • Corrective action
  • What precautionary measures the public should take
  • Specify that the PBWN will be officially rescinded following the receipt of satisfactory microbiological sampling.
  • Any other information required in 62-560.410(5), FAC.

____ Contact your regulatory agency (DEP District Office or ACHD) as soon as possible, but no later than noon on the next business day (62-555(10)(b), FAC).

  Regulatory Agency Name: _______________________________________________________
  Phone Number: ________________________________________________________________
  Contact Person: ________________________________________________________________

____ Notify your local CHD if your regulatory agency is the DEP District Office (62-555.335(18), FAC).


____ Notify your county Emergency Operations Center (during a declared emergency).

____ Corrective actions / repairs complete

____ Unless otherwise directed by your regulatory agency, take bacteriological samples (62-555.340(2), (3), FAC) as follows:
  o For a system-wide outage, collect water samples according to your approved written microbiological sampling plan. For a community system this is the monthly compliance set.
  o For a smaller outage, collect one (1) sample per 1,000 people affected, with a minimum of two (2), within the specific area affected.

____ For water main breaks two consecutive days of satisfactory samples (62-555.340(2)(a),(b), FAC). is required.

____ Copy of the lab results sent to your regulatory agency (62-555.340(2)(c), FAC)

____ Regulatory agency approval to rescind the PBWN (62-555.340(5), FAC).