



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## Drinking Water Incident/Malfunction Report Form

Submit the completed form by email to [DEP\\_CD@dep.state.fl.us](mailto:DEP_CD@dep.state.fl.us)

PWS ID: \_\_\_\_\_ PWS Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Was the event a planned outage \_\_\_\_\_ or a malfunction? \_\_\_\_\_

Time water system was/is expected to be back in service: Time: \_\_\_\_\_

Situation was reported to:

DEP \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Health Dept. \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Other \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Location of trouble: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If material failure, give a (complete as possible) description of the material(s) including size, type, any available manufacturing information shown on the failed product. If known, include cause of failure:

\_\_\_\_\_  
\_\_\_\_\_

Statement of trouble: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Corrective action: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of customers affected: \_\_\_\_\_

Were customers notified? \_\_\_\_\_ Explain \_\_\_\_\_  
\_\_\_\_\_

Was a precautionary boil water notice issued? \_\_\_\_\_

Was water line flushed and chlorine residual restored prior to placing back into service? \_\_\_\_\_

Were bacteriological samples taken? \_\_\_\_\_ Location taken: \_\_\_\_\_

**If a Precautionary Boil Water Notice was issued, please attach or submit together with this report. Bacteriological reports (2 days) as well as a rescission notice must follow.**

Additional remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_