Annual Water Quality Report Certification Form

Valley Dale

Water System Name:	
Public Water Supply ID #:1302813	
The community water system named above hereby confirms that its Annual Water Qual been distributed to customers and appropriate notices of availability have been gived certifies that the information contained in the report is correct and consistent with the data previously submitted to the health department. Certified by: Name: Danielle Hardman Operations Support Phone #: 845.486.3601 Date: July 11, 2025	n. Further, the system compliance monitoring
Please indicate how your report was distributed to your customers:	
☐ AWQR was distributed to bill-paying customers by mail.	
X AWQR was distributed by other direct delivery method(s) (check all that apply)	
☐ Hand delivered.	
 □ Published in local paper (i.e., <i>Penny Saver</i>) that was directly delivered or more customers. □ Published in local municipal newsletter that was directly delivered or mailed. 	nailed to all bill-paying
X Mailed a notification that AWQR is available on a public website via a direct URI	
☐ Emailed with a message containing a direct URL link to the AWQR	J
☐ Emailed with AWQR sent as an attachment to the email	
☐ Emailed with AWQR sent as an embedded image in the email	
☐ Additional electronic delivery that meets "otherwise directly deliver" requirement	
Other (please specify)	
System does not have bill-paying customers.	
☐ For systems serving at least 100,000 persons: in addition to direct delivery to b	ill-paying customer the
AWQR was posted on a publicly-accessible website at www	
Please indicate what "Good Faith" efforts were used to reach non-bill paying consumers (check all that apply).
X Posting the Annual Water Quality Report on the Internet at www.dutchessny.gov Mailing the Annual Water Quality Report to postal patrons within the service area	Mailed 05/31/2025
☐ Advertising the availability of the Annual Water Quality Report in the news media	
☐ Publication of the Annual Water Quality Report in a local newspaper	
☐ Posting the Annual Water Quality Report in public places (attach a list of location	s)
☐ Delivery of multiple copies to single-bill addresses serving several persons	,
businesses, and large private employers	
☐ Delivery to community organizations	
☐ Other (please specify)	

INSTRUCTIONS

Annual Water Quality Report Certification Form

Community Water Systems must submit this Certification Form **by September 1**st of each year to the New York State Department of Health in Albany, NY and to the county or district health department office that has jurisdiction over the water system.

The certification must indicate how the water systems Annual Water Quality Report (AWQR) was distributed and that the information within the AWQR is correct and consistent with the compliance monitoring data previously submitted to the overseeing health department.

This Certification Form should be submitted to the New York State Department of Health in Albany: By mail to:

NYS Department of Health Attn: Roger C. Sokol, Ph.D. Director, Bureau of Water Supply Protection Corning Tower, Room 1110 Empire State Plaza Albany, NY 12237

Or electronically to:

AWQR@health.ny.gov