



## Service Line Inspection or Replacement Refusal Form Instructions

### Background

Public water systems (PWS) that have detected a public side lead service line or public or private side lead status unknown service line must inspect the private side service lines, at no cost to the property owner, to determine if lead or galvanized iron or steel is present. If lead is detected in any service line, including private side service lines, the lead service line must be replaced. The PWS must make at least two attempts for inspection and two attempts for replacement. If a property owner refuses to allow an inspection or replacement of private side service lines, PWSs must notify the Rhode Island Department of Health (RIDOH) within 30 days following the second refusal in accordance with Section 28(o) of the Rhode Island *Lead Poisoning Prevention Act*, Rhode Island General Laws § 23-24.6 *et seq.* Use this form to notify RIDOH of refusals. RIDOH will also post the address at which the refusal took place to its website as another form of public notification.

### Instructions

Fill in the PWS name and ID# and the address where entry was refused. Leave the “apartment” field blank if the service line serves multiple apartments. Select the refusal type (inspection or replacement). In the table, enter information about each attempt made to document the refusal. Include a signature from the PWS personnel who made the attempt—digital signatures will be accepted.

Distribute the applicable refusal notice to all occupants at the address where entry was refused. **Distribution can include** placing copies under occupants’ doors or sending through the mail. In addition, the notice can be posted in shared spaces of apartment complexes or public buildings. Be sure to fill in the *Certification of Notice Distribution* section of the form.

Inspection and replacement refusal notice templates are available in English and Spanish on the webpage: [health.ri.gov/water/about/RevisedLeadCopperRule](http://health.ri.gov/water/about/RevisedLeadCopperRule). If the PWS’s community speaks a language other than English or Spanish, the PWS should seek translation services to provide the notice in the appropriate language(s).

Send completed forms to RIDOH Center for Drinking Water Quality within 30 days of the second refusal using one of the following methods:

Email (**preferred method**): [DOH.RIDWQ@health.ri.gov](mailto:DOH.RIDWQ@health.ri.gov) using the subject line *Service Line Inventories*.

Paper mail: RIDOH – Center for Drinking Water Quality  
3 Capitol Hill, Rm 209, Providence, RI 02908

Fax: 401-222-6953

If you have questions about the inspection or replacement process, call the Center for Drinking Water Quality at 401-222-6867 or email [DOH.RIDWQ@health.ri.gov](mailto:DOH.RIDWQ@health.ri.gov) with the subject line *Service Line Inventories*.



# Service Line Inspection or Replacement Refusal Form

## Rhode Island *Lead Poisoning Prevention Act*, Rhode Island General Laws § 23-24.6

If a property owner refuses to allow an inspection or replacement of the private side service line(s) after two attempts, the public water system (PWS) must notify the Rhode Island Department of Health (RIDOH) within thirty (30) days following the second refusal. RIDOH will also post this address to its website as another form of public notification. **Note:** Leave “apartment” field blank if the service line serves multiple apartments.

### **Refusal Details:**

The public water system (*name*) \_\_\_\_\_

(*PWS ID#*) \_\_\_\_\_ identified a lead or lead status unknown service line at the following address (*address*) \_\_\_\_\_

(*apartment*) \_\_\_\_\_ (*city or town*) \_\_\_\_\_ (the Property). The

owner of the Property refused a service line (*check one*)  **inspection**  **replacement** by the PWS on at least two occasions. The attempts made by the PWS are documented in the table below (*must demonstrate two attempts*):

Date	Time	Name of person (property owner) who refused attempt	Name of PWS personnel who made attempt	Signature of the PWS personnel who made attempt

### **Certification of Notice Distribution:**

The public water system distributed notice of the inspection or replacement refusal to all occupants at the address identified above by (*describe method*) \_\_\_\_\_

\_\_\_\_\_

Signature of the PWS personnel: \_\_\_\_\_

Printed name: \_\_\_\_\_ Date: \_\_\_\_\_