

# Template: Notification Letter to CustomersDRINKING WATER RISK COMMUNICATION TOOLKIT

## How to use this document

This document includes guidance and suggested text to notify customers about detection of unregulated contaminants that exceeds health-based guidance values.

For unregulated contaminants detected in sampling, insert the community name, contaminant name, information and test results in the text where indicated. Include relevant resources or contact information as needed. Contact MDH with any questions or for assistance.

## Instructions and example language:

Dear [Name of community] resident,

All [Name of community] residents are receiving this notice about the City’s municipal water supply. The City’s municipal water system serves approximately [number of households] households. [If applicable:] The remaining homes in the city are served by private wells. If you have your own well, you are responsible for having it tested for safety.

The Minnesota Department of Health (MDH) regularly tests the City’s municipal water supply. The most recent test results show that the municipal water supply [meets all (change if needed)] Safe Drinking Water Act standards. However, some of the City’s municipal drinking water wells have [contaminant name] levels above MDH’s recommended health guidelines. If you or your family consume City municipal water, MDH recommends considering [insert MDH recommendations, for example: home water treatment or bottled water for drinking, cooking and preparing infant formula].

### Health Guidelines for [contaminant name]

[Insert 1-2 sentences about the contaminant, such as what kind of chemical it is and how it gets into water.] Learn more on the MDH webpage [Website Name (URL)].

The MDH recommended health guidelines are:

* [Insert MDH recommendation(s) on safe levels of contaminant for vulnerable populations, if applicable.]
* [Insert MDH recommendation on safe levels of contaminant for general population.]

### The Issue: High [Contaminant Name]

*For systems using groundwater:* The City has [number of wells] drinking water wells that are tested for [contaminant name]. The City municipal water supply is a mixture of water from [number of wells] wells. This year, [number of wells with exceedance] of the City’s [number of wells] wells tested above the MDH health guideline(s) [for general or vulnerable population, if applicable]. The other wells have low [contaminant name] levels below the guidelines.

*For systems using surface water:* The City receives its drinking water from [name of drinking water source]. This year, [name of drinking water source] tested above the MDH health guideline(s) [for general or vulnerable population, if applicable].

### City Solution

The [name of your organization/City Council] is diligently working with City staff, industry and MDH professionals on short-, mid-, and long-term plans to address the safety of the City’s municipal drinking water.

As soon as we learned of the elevated [contaminant name] levels, the City began [describe actions taken, e.g. using the wells with lower contaminant levels]. [If applicable, describe any effects from actions taken, such as changes to expect in drinking water color or taste.]

The [name of your organization/City Council] is in the process of finding a long-term solution to reduce levels of [contaminant name] in drinking water to its residents. Several options are being considered, which include:

* [Insert list of options being considered. Avoid technical language that may not be understood by the general public.]

### What Can I Do?

[Insert recommendations for residents. Consult with MDH with questions or for more information. Examples are listed below – delete if not applicable.]

There are several things you can do to remove [contaminant name] from your drinking water. Certain types of home water treatment devices remove or reduce [contaminant name] (some refrigerator water filters, pour-through pitchers, units that attach to faucet, water softeners, etc.). If you already have a home water treatment device that removes or reduces [contaminant name], you may want to test the water levels coming from the tap you use for drinking and cooking. This will give you a general idea of the [contaminant name] level in your water. If you choose to test your water, we recommend using one of the accredited labs listed on [Accredited Labs (PDF) (https://www.health.state.mn.us/communities/environment/water/docs/wells/waterquality/labmap.pdf)](https://www.health.state.mn.us/communities/environment/water/docs/wells/waterquality/labmap.pdf).

If you do not have a home water treatment device that removes or reduces [contaminant name], you may want to consider installing one on the tap used for drinking, cooking, and preparing infant formula. Bottled water is a short-term alternative. Look for bottled water that is **not** labeled “mineral water.”

Treatment devices should be certified to remove [contaminant name]. All home water treatment units require maintenance. Visit the MDH webpage on [Home water Treatment Fact Sheet (https://www.health.state.mn.us/communities/environment/water/factsheet/hometreatment.html)](https://www.health.state.mn.us/communities/environment/water/factsheet/hometreatment.html) to learn more.

Homeowners with private wells are responsible for having their wells tested. Learn more by reading the MDH [Owner's Guide to Wells (https://www.health.state.mn.us/communities/environment/water/wells/waterquality/test.html)](https://www.health.state.mn.us/communities/environment/water/wells/waterquality/test.html)*.* The [insert name of county department] accepts water samples. [Insert information about availability and location of test kits, lab fees, and contact information for questions.]

### For More Information

For more information, visit our website at [website address] or call the City Water Hotline at XXX-XXX-XXXX. [Insert time, date, and location of public meeting to discuss the issue, if applicable.]

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To obtain this information in a different format, call 651-201-4700.