



MARYLAND DEPARTMENT OF THE ENVIRONMENT
Water Supply Program, 1800 Washington Blvd, Suite 450, Baltimore, MD 21230
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Reporting.leadsschoolwater@maryland.gov

DEFERRAL APPLICATION - 12 MONTH
Lead in Drinking Water– Public and Nonpublic Schools

This is an application for a deferral from testing for lead in a public and nonpublic school in accordance with COMAR 26.16.07. Incomplete applications will result in the request being denied. **Return this application to the address listed above. If emailing, include the word “DEFERRAL” and school name in subject line.**

I. GENERAL SCHOOL INFORMATION:

School Name: _____

Street Address: _____

City: _____ Zip Code: _____ County: _____

School Building Name/ID #: _____

School Type (Check Below):

School Type

Public

Charter

Nonpublic

Identification Number

Public School Construction Number (PSC#): ____ - ____ - ____

Charter School ID #: ____ - ____ - ____

Nonpublic School ID #: 09 - ____ - ____

II. DESIGNATED RESPONSIBLE PERSON:

Name: _____ Title/Position: _____

Telephone #: _____ Email Address: _____

III. SCHOOL SAMPLING SCHEDULE: Check the appropriate box below that applies to your school building:

July 1, 2018 : Buildings constructed before 1988, and/or school buildings serving students in prekindergarten through grade 5

July 1, 2019: Buildings constructed in 1988 or later and serving students in grade 6 through grade 8.

July 1, 2020: Buildings constructed in 1988 or later and serving students in grade 9 though grade 12.

IV. DEFERRAL REQUEST CHECKLISTS: In order for a deferral to be considered, all tasks in the corresponding checklist must be completed in full.

12 Month Deferral:

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Has the school developed a plan to identify and clearly describe the type, location, and unique identifying information of each drinking water outlet?
<input type="checkbox"/>	<input type="checkbox"/>	Has the school developed a sampling plan in accordance with standard sampling methods as described in COMAR 26.16.07.07?
<input type="checkbox"/>	<input type="checkbox"/>	Does the school have plans in place to take actionable steps (e.g., fixture replacement, point-of-use filter installation, etc.) if an elevated level of lead is found in a drinking water outlet in the school?

V. CERTIFICATION:

By signing below, I certify that all statements in this deferral application are true and correct, and that all indicated tasks and activities have been completed in full. I acknowledge that MDE and/or MSDE may request documentation at any time, may enter school buildings upon reasonable notice, and may immediately revoke a deferral upon discovery of incomplete or erroneous documentation.

Designated Responsible Person Signature

Date

Designated Responsible Person Name (Printed)

Title