

CONTRACTOR CERTIFICATION OF DISINFECTION QUANTITY

(DATE)

White House Utility District
Attn: Lisa Weathers
P.O. Box 608
White House, TN 37188
Fax: 615-672-9427

RE: Project Name: _____
 WHUD Job #: _____
 TDEC Job #: _____

Dear Mrs. Weathers:

By my signature below I certify that at least _____ pounds of 65% available HTH Chlorine were used to disinfect the newly constructed water mains in the development mentioned above.

Sincerely,

(Signature)

(Printed Name)

(Title)