

Public Water System Peer Review Request Form

Please Type/Print

Name of Public Water System: _____

Mailing Address: _____

City/State/Zip Code: _____

County: _____

Name of Public Water System's Point of Contact for this Peer Review Request:

Point of Contact's Phone #: _____ (8 a.m. to 5 p.m.)

I would like to request that the MSU Extension Service arrange for the conduct of a Peer Review of this public water system. I understand that knowledgeable water system operators and officials will conduct this Peer Review. I further understand that the results of this Peer Review will be kept confidential and no federal or state agencies will know the results of any Peer Review conducted on this public water system.

Name of Responsible Official (Please Print/Type)

Title (mayor, president, etc.)

Signature of Responsible Official

Date

Mail the completed Peer Review Request Form to: Jason Barrett
Mississippi State University
Department of Agricultural Economics
P.O. Box 5187
Mississippi State, MS 39762

For more information: Phone - 662.325.6087 FAX - 662.325.8777
E-Mail Address – barrett@agecon.msstate.edu

