

**CERTIFICATION OF ADOPTION
WATER EMERGENCY AND CONSERVATION PLAN**

City or Water System Name:

Name of Person Authorized to Sign
Certification on Behalf of the System:

Title:

Address:

Telephone:

Fax:

E-mail:

I certify that the Water Emergency and Conservation Plan approved by the Department of Natural Resources has been adopted by the city council or utility board that has authority over water supply services.

Signed:

Date:

Fax (218/327-4263) or mail this certification to:

**DNR Ecological & Water Resources
525 Lake Ave South Suite 415
Duluth, MN 55802**

Or email to:

**greg.root@state.mn.us or
patricia.fowler@state.mn.us**