Colorado Department of Public Health and Environment

Water Quality Control Division

Safe Drinking Water Information System (SDWIS) Contact Verification Form

This form is used to collect the info information for the current water	rmation necessary to maintain an ac r system and return to the division	ccurate database and to ensure public health. Please provide all available n by January 20, 2009.
PWSID Number:	COO 207504	
System Name: MEAN	OW MOUNTAIN WA	TER SUPPLY County: BOULDER
System Mailing Address:	P.O. BOX 354	City: ALLENSPARK State: CO Zip: 80510
System Physical Address	125 加高 MEMBOW MTN DE	RIVE_City: ALLENSPARK State: CO Zip: 80510
System Phone: 303-823	-2318 Ext:Fax: 5	AMERSPH. E-mail: RCBARKWORTH@YAHOO COM
	ame: RACHEZ BARK trative contact receives mail at the PWS	CORTH location and is the primary contact person for drinking water program communications.)
Admin Contact Mailing Ad	Idress: P.O. Box 35	4 City: ALLENSPAREState: CO Zip: 80510
Admin Contact Phone: 3	03-823-2318 Ext:Fa	E-mail: REBARTWORTHE YAHOO CO
		ISTERED AGENT) OF METHOWN MOUNTAIN WS Co. iation, state or political subdivision thereof, municipality, or other legal entity.)
Owner Mailing Address:		City: ALLENS PARK State: CO Zip: 80510
Owner Phone:	(P.O. Box or Mail Step)Ext:Fax:	E-mail:
Emergency Contact Name	STEVE TEOFORD	
Emergency Mailing Addre	ss: P.O. Box 394	City: ALUENSPARK State: CO Zip: 80510
Emergency Phone: 303-	747-2593 Ext:Fax:	E-mail Sbtedford@iglide net
Person Completing Form	: RACHEL BARKWOR	Title: RECORDS Date: 010109
Please return by faxing to	303-758-1398	
	drinkingwater@state.co.us	
	ept. of Public Health & Envi	ronment
	ADM Drinking Water Data M	
	ry Creek Drive South	For Dept. Use Only:
Denver, C	O 80246-1530	Entered By: Date: