

## **Covid-19 Pre-Survey Form**

**WSID and Water System Name:**

**Date of Scheduled Survey:**

**Name of Water System Representative (DO or AC):**

Please review the following information and complete the form. Return the signed form to the Drinking Water and Groundwater Protection Division (Division) at a minimum of one week prior to the scheduled survey. This form must be completed and signed by the member of the Water System that will be in attendance for the survey. One representative of the Water System will be permitted to attend the survey. The Water System representative must be the Designated Operator (DO) or the Administrative Contact (AC).

Please take the time to review the Centers for Disease Control and Prevention (CDC) protocols for protecting yourself and others against the spread of Covid-19 and the recommendations pertaining to the use of cloth face coverings.

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>

***Please be aware that during the survey social distancing (6') and face mask protocols must be strictly adhered to at all times. Failure to follow social distancing or face mask protocols will result in the cessation of the survey.***

The Division highly recommends that the Water System register with VTWARN, which will allow Water and Wastewater Systems to receive rapid mutual aid and assistance from other systems to continue providing services if they are impaired by unforeseen staff absences or materials shortage.

<https://dec.vermont.gov/vtwarn>

Please answer the following questions in the space provided. This form is a fillable PDF and must be returned to the Division electronically. If the Water System does not have the capability to return the form electronically, please inform the Division as soon as possible.

***Please be aware that the surveyor will be in contact with the Water System representative the day prior or the morning of the survey to verify that the answers provided by the Water System for Questions 1, 2 and 3 are still valid and to confirm that the representative is still healthy and Covid-19 symptom free.***

1. Are you currently sick? Do you have a fever, runny nose, aches, or pains?
2. Have you travelled outside of the State of Vermont in the last 14 days?
3. Have you been in contact with anyone that has been diagnosed with Covid-19 in the past two weeks?
4. Do you have access to Personal Protective Equipment (PPE)? What type?
5. Does the survey of the system require a vehicle to travel to and from system elements? Is a 4-wheel drive vehicle required?
6. During the survey will it be possible to adhere to the CDC's social distancing protocol (6' apart) at all times? If no, please explain why.
7. Is the Water System Operator proficient in the use of streaming apps, such as FaceTime®, Teams®, Skype® or other service?
8. Is there adequate cell service or Wi-Fi at the location (s) where the survey will take place?
9. Does the Water System have any questions for the Division on conducting the survey while adhering to CDC protocols?

Signature \_\_\_\_\_

Date \_\_\_\_\_