

## **REQUEST FOR REVIEW OF A DRINKING WATER OFFICER DECISION**

(Please note that reviews are conducted on the material that was before the Drinking Water Officer when the decision was made. New evidence cannot be submitted or considered on a review. If you have new evidence that you consider relevant, you may wish to ask the Drinking Water Officer to reconsider his/her decision. An alternate form is available for such requests.)

**Pursuant to section 39.1 of the** *Drinking Water Protection Act*, I request a review of the following **decision of a Drinking Water Officer:** (*Please attach copy of decision letter/order issued by Drinking Water Officer*)

## I consider this decision is to be subject to review under section 39.1, on the basis that it is a decision that was made under:

section 19 [drinking water officer authority in relation to assessments]

section 25 [hazard abatement and prevention orders]

section 26 [orders respecting contraventions]

section 31(4) [request respecting plan initiation]

it was a decision that resulted from a reconsideration of one of the above

## I believe that the decision should be reversed or varied for the following reasons:

(Please attach additional pages if necessary)

**Contact information for person making the request:** 

Name: Address: City:	Postal Code:	Office of the Provincial Health Officer PO Box 9648, STN PROV GOVT 1515 Blanshard St., 4 <sup>th</sup> Floor Victoria BC V8W 9P4
Phone:		
Signature:		Date:

Print and mail completed form to: