		Mississipp	i State Departme	ent of Health	- Bureau of P	ublic Water Sup	ply - Service Lir	ne Inventory															
		MUST ENTER FIRST ↓ Click On Column Headers For Input Message			MUST ENTER FIRST↓			_															
	PWS ID	240257	PWS Name	HCUA - Traditions	Date of Current Inventory	4/24/2024	Official Service Line Ownership Policy	Public-PWS															
<u>Optional</u>	MUST ENTER FIRST↓		REQUIRED						<u>Opt</u>	<u>ional</u>	LSL DETERMINATION	Site Plan Builder						FORMULA -AUTO POPULATED					
SYSTEM SPECIFIC ID	OWNERSHIP OF SERVICE LINE	SERVICE ADDRESS	LEAD CONNECTOR CURRENTLY PRESENT? (E.G., GOOSENECK, PIGTAIL, OTHER)	PWS-OWNED SERVICE LINE MATERIAL	PRIVATE SIDE SERVICE LINE MATERIAL	VERIFICATION SOURCE	IF GALVANIZED LINES INVOLVED, WAS LEAD EVER UPSTREAM OF THIS SERVICE LINE? (EXCLUDE CONNECTOR)	WAS PWS-OWNED SERVICE LINE EVER LEAD?	YEAR PWS-OWNED SERVICE LINE INSTALL DATE (Optional)	YEAR PRIVATE SIDE SERVICE LINE INSTALL DATE (Optional)	LSL CATEGORY IN SYSTEM INVENTORY	BUILDING TYPE	POINT OF ENTRY OR POINT-OF USE TREATMENT PRESENT?	STRUCTURE- PRIMARY PLUMBING MATERIAL 1	STRUCTURE-	YEAR(RANGE)STR UCTURE PLUMBING MATERIAL INSTALLED	THIS LOCATION WILL BE USED FOR LEAD AND COPPER SAMPLE SITE PLAN?	LSL CATEGORY IN INVENTORY	SAMPLE SITE SELECTION CRITERIA (SITE TIER)	WOULD THIS COUNT AS FULL LEAD SEVICE LINE REPLACEMNET IF LEAD IS REMOVED?	REQUIRES RESIDEN NOTIFICATION IF LS DISTURBED	T REQUIRES RISK L MITIGATION (POU OR PITCHER FILTER)	GENERAL NOTES SPECIAL BUILDING TYPE (Optional)
Public	Public-PWS	N/A	N	Plastic	Plastic	Visual Inspection	No	N	N/A	No	Non Lead	Other						Non Lead	BLANK	NO	NO	NO	