



NOTIFICATION OF FLUORIDE DISCONTINUATION

PUBLIC WATER SUPPLY NAME: _____

135.39E Fluoridation in public water supply — notice of discontinuance.

1. At least ninety days prior to taking any action to permanently discontinue fluoridation in its water supply, an owner or operator of a public water supply system, as defined in Iowa Code [section 455B.171](#), shall provide notice to the oral and health delivery system bureau established in [section 135.15](#) and the public water supply system's customers.
2. In order to provide notice to its customers, the owner or operator of the public water supply system shall place a notice on each customer's water bill or provide notice in a way that is reasonably calculated so that all customers will receive the notice.
3. [Section 135.38](#) does not apply to violations of this section.

Water System Modification: Removing Fluoridation

Anticipated date of vote: _____

Water System Notifications, as required:

Iowa Department of Public Health, Bureau of Oral and Health Delivery Systems

MAIL: Iowa Department of Public Health
 ATTN: Water Fluoridation Coordinator
 321 East 12th St. Des Moines, Iowa 50319

EMAIL: oral.health@idph.iowa.gov

Method of Notification: FAX: (515)242-6384

Date Sent: _____

Water System Customers

Check all methods that apply: Notice on water bill Radio Television Newspaper
 Mailing Email Social Media
 Other: _____

Date Sent: _____

Please attach a copy of the language used in the water system's notification.

Signature:

PRINTED NAME
TITLE
EMAIL ADDRESS
PHONE NUMBER WITH AREA CODE

Please Note:
Removing Fluoride: The department will respond to this notification that the form was received and the 90 day time frame will begin on the date notification was made to customers and Department of Public Health staff, whichever came last.

For more information or assistance completing this form, contact the Bureau of Oral and Health Delivery System at (515) 204-3450 or oral.health@idph.iowa.gov