

State of New Jersey  
Department of Children and Families  
Office of Licensing

**DRINKING WATER TESTING STATEMENT OF ASSURANCE**

• PROGRAMS IN OPERATING PUBLIC SCHOOLS ARE NOT REQUIRED TO COMPLETE THIS FORM •

<b>Name of Child Care Center:</b> The Leaguers, Inc.		<b>License ID:</b> 07BAB0014
<b>Site Address (Building # and Street):</b> 1-4th Avenue /490 4th Avenue		
<b>Municipality:</b> Newark	<b>County:</b> Essex	
<b>Sponsor/Sponsor Representative:</b> The Leaguers, Inc.		<b>Phone #:</b> 973-643-0300
<b>Sponsor/Sponsor Representative Email:</b> Leaguers281@aol.com		
<b>Additional Contact Person:</b> Helen Grace-Fields		<b>Phone #:</b> 973-643-0300
<b>Title:</b> Director of Licensing	<b>Email:</b> helen_grace@theleaguers.org	

1. The center, as described above, has reviewed the MANUAL OF REQUIREMENTS FOR CHILD CARE CENTERS requiring testing for lead and copper in drinking water and provides assurance that the development and implementation of a testing program was completed in accordance with N.J.A.C. 3A:52-5.3(i)5i as evidenced by our completion of the attached Drinking Water Testing Checklist.
2. The center, as described above, provided all notifications of test results consistent with the requirements of this subchapter.
3. The center, as described above, will continue to fully implement the requirements of this subchapter, including the continuance of any actions taken in response to a lead or copper action level exceedance (e.g., continue to provide bottled water and/or maintain any remedial measure or treatment unit).

**CERTIFICATION:** By signing below, the **Sponsor or Sponsor Representative** certifies that all statements above are true and accurate:

<b>Sponsor/Sponsor Representative: (PRINT)</b>	Helen Grace-Fields
<b>Signature:</b>	Helen Grace-Fields
<b>Signature Date:</b>	January 13, 2022