



DRINKware

Drinking and Ground Waters Information Network

SOFTWARE REQUEST FORM

DRINKware will be sent in CD format.

Would you be interested in attending a **DRINKware** training course? The course would be one day in length and would be offered at centralized locations throughout the state.

yes, I would be interested in more information on a DRINKware training course.

no, I would not be interested in attending a DRINKware training course.

Name

Facility Name

Street

City, State, ZIP

Telephone

County Location

Please Return To:

**DRINKware
Ohio EPA, Division of Drinking and Ground Waters
P.O. Box 1049
Columbus, Ohio 43216-1049**