

PFAS Remediation Program Initial Application

Thank you for your interest in WRD’s PFAS Remediation Program. The following application is designed to be an initial application to understand your PFAS impacts and unique support needs. Once your application has been received, WRD staff will review and may request additional information as needed in case further clarification or details are needed about information supplied in this form. Please make sure to attach the requested supplemental information (questions 7&8) along with this completed application in one email to Diane Gatza at Dgatza@WRD.org. All initial applications should be filled out and submitted by **September 30, 2020**. Once submitted you will receive a confirmation email and Diane will follow up with you as needed before a joint BAC/TAC meeting in October 2020.

1. How many of your wells currently have PFAS levels **at or above** the current Response Level (RL) for PFOA (i.e., ≥ 10 ng/L) or PFOS (i.e., ≥ 40 ng/L)? Provide the official name of your well(s) as reported to WRD Watermaster and highest reported concentration for PFOA / PFOS. **NOTE if your agency DOES NOT have wells at or above the RL please skip questions 1&2 and proceed to questions 3&4)*

Well Name	Highest Reported Concentration in ng/L	
	PFOA	PFOS

List other wells: _____

2. Of the wells identified in question 1, what is the past three years of production by well reported to WRD Watermaster? Provide the official name of your well as reported to WRD Watermaster.

Well Name	Production in Acre Feet			
	Year 1	Year 2	Year 3	Total

Values should be for a twelve-month period and rounded to the nearest whole number.

List other wells: _____

3. How many of your wells currently have PFAS levels within 25% of the current Response Level(RL) for PFOA (i.e., ≥ 7.5 ng/L) or PFOS (i.e., ≥ 30 ng/L)? Provide the official name of your well as reported to WRD Watermaster. **NOTE if your agency does NOT have wells within 25% of the RL please skip questions 3&4)*

Well Name	Highest Reported Concentration in ng/L	
	PFOA	PFOS

List other wells: _____

4. Of the wells identified in question 3, what is the past three years of production by well for these wells reported to WRD Watermaster? Provide the official name of your well as reported to WRD Watermaster.

Well Name	Production in Acre Feet			
	Year 1	Year 2	Year 3	Total

Values should be for a twelve-month period and rounded to the nearest whole number.

List other wells: _____

5. My agency would prefer the following support type:
- Funding ONLY (pumper to complete all planning, permitting, design and construction and only seeking reimbursements for monies spent)
 - Turn-key System (WRD to deliver a complete and operational treatment system to the pumper)
6. Does your agency have access to additional water supplies besides groundwater?
- Yes
 - No
7. If your agency is seeking funding support (not a turnkey system) what is your programmatic resource loaded schedule? This would be your schedule for implementation including when money is anticipated to be spent. Please attach your schedule to this application.



- 8. Does your agency have any cost estimates or anticipated funding needs for your treatment system? If so, please attach to this application. **NOTE - Applicable costs are limited to planning, permitting, design, construction, engineering services during construction and construction management of the treatment system and appurtenances of the treatment system.*

- 9. Provide the name of your agency and contact individual for this program for future correspondence

Agency	Contact Person and Title	Email	Phone