

**OPTIONS ACCEPTANCE AGREEMENT
POINT OF ENTRY TREATMENT SYSTEMS**

Please select one of the following options by placing your initials on the line preceding the option and signing below.

_____ Option 1: I grant access to the Department of Environmental Protection (DEP) for the installation of a Point of Entry Treatment System (POETS) on my well water supply. I understand that bottled water delivery will cease once the installation of the POETS is completed and the system is determined to be removing the contaminants. I understand that I will be responsible for maintaining the POETS at my own expense, including regularly scheduled change-out of the treatment media, should DEP's final response decision include a POETS to permanently address the contamination in my well water. If DEP's final response decision includes a POETS, I agree to record, with the Columbia County Recorder of Deeds, within 60 days of the final response decision, an Environmental Covenant which runs with the land acknowledging the existence of contamination in my well water and the need for treatment.

_____ Option 2: I **DO NOT** grant access to DEP for the installation of a Point of Entry Treatment System (POETS) on my well water supply. I do not wish to have a POETS installed on my residential well. I acknowledge that I have been advised that drinking water from the existing well without treatment poses serious potential health risks. I understand that hereafter DEP will not be responsible for the installation, operation, or maintenance of any future treatment system. I understand that once a final remedy is implemented for my property, I may no longer be provided with bottled water delivery by DEP. I agree to record, with the Columbia County Recorder of Deeds, within 60 days of my signing this Notice, an Environmental Covenant which runs with the land acknowledging the existence of contamination in my well water and the need for treatment. I acknowledge that I may also be liable for any personal or environmental injury or damages that may result from the continued use of the untreated contaminated well water.

SIGNATURE – property owner

DATE

Property Address: _____

Please return form at your earliest opportunity to:

Pennsylvania Department of Environmental Protection
Attn: Cheryl Sinclair
208 W. 3rd Street, Suite 101
Williamsport, PA 17701