



pennsylvania
DEPARTMENT OF ENVIRONMENTAL
PROTECTION

June 29, 2016

Re: Private Well Sampling
Easton Road PFC HSCA Site
Bucks County

Dear Property Owner or Current Resident:

The Pennsylvania Department of Environmental Protection (DEP) is conducting a groundwater investigation in your area. The investigation is being conducted pursuant to the Pennsylvania Hazardous Sites Cleanup Act, Act of October 18, 1988, P.L. 756, No. 108, as amended, 35 P.S. Section 6020.101 et seq. (HSCA), for the purpose of determining the extent of perfluorooctanoic acid (PFOA) and perfluorooctane sulfonate (PFOS) in the aquifer underlying the area, which we are referring to as the Easton Road PFC HSCA Site (Site). PFOA and PFOS are part of a larger class of chemicals known as perfluorinated compounds (PFCs). Please see the enclosed information sheet for more details about these chemicals and the investigation we are conducting.

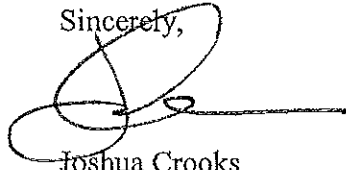
At this time, DEP is in the process of gathering information from private well owners within the investigation area. The Site encompasses a one-mile radius within Doylestown, locally referred to as the "Cross Keys" area. Your property has been identified as lying within this radius. Accordingly, we ask for your assistance in completing the enclosed "Private Well Questionnaire". Kindly fill it out to the best of your ability and return it in the self-addressed stamped envelope provided. This information will allow us to develop a well inventory which will greatly assist us in developing an organized strategy to sample as many wells as possible in the area.

Once we receive completed well questionnaires and make arrangements with a testing laboratory, we will begin contacting residents to schedule sampling. Due to the large number of private wells in the investigation area and corresponding limitations on laboratory availability and capacity, sampling will need to be conducted through multiple events in the coming months. We ask for your patience and cooperation as we work as quickly and efficiently as possible to ensure that we identify and contact all private well owners who wish to be included in our investigation.

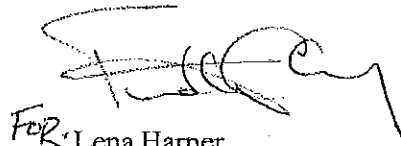
The sampling process itself will take approximately 20 minutes and will be conducted by DEP and/or our contractors. If you are not able to be home during regular business hours, we can take a sample from an outside spigot, with your permission, as indicated on the well questionnaire. All costs associated with the collection and analysis of the water samples will be paid by DEP. Upon receipt from the testing laboratory, DEP will furnish you with a copy of the analytical results from your well water. We are sampling for PFCs only.

Your cooperation and assistance is greatly appreciated. If you should have any questions, please contact the project officer listed at the top of the enclosed questionnaire.

Sincerely,



Joshua Crooks
Solid Waste Specialist
Environmental Cleanup and Brownfields



For: Lena Harper
Solid Waste Specialist
Environmental Cleanup and Brownfields

Enclosures

cc: Doylestown Township
Buckingham Township
Plumstead Township
Doylestown Borough
Bucks County Health Department
Pennsylvania Department of Health
Re 30 (eh16ecb)180

PRIVATE WELL QUESTIONNAIRE
Pennsylvania Department of Environmental Protection
Hazardous Sites Cleanup Program
Southeast Regional Office

EASTON ROAD PFC HSCA SITE

PROPERTY OWNER NAME(S): _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

MAILING ADDRESS: _____
(leave blank if same as above)

PHONE: _____ EMAIL: _____

Is this a rental unit? YES NO (If a rental, please provide both owner and tenant contact info. Use the back of this form if you need more room.)

Number of occupants: _____

Depth of well (in feet): _____

Do you use your well for drinking water? (please circle) YES NO

Do you treat your water? (please circle) YES NO

If YES: (please circle) Water Softener Carbon Filtration Unit
Reverse Osmosis Other: (please specify) _____

If YES, can the treatment unit be bypassed to collect an untreated sample? YES NO

Has your well been previously tested for PFCs? (please circle) YES NO
(If YES, please provide us with a copy of the previous results.)

To help expedite scheduling, please indicate if we may use an outdoor spigot to collect a sample during regular business hours: (please circle) YES NO

I hereby consent to the Department and/or its contractors accessing the above property to conduct the sampling described in the accompanying letter.

Print Name

Signature

Thank you for taking the time to fill out this form. Kindly return it to our office in the enclosed self-addressed stamped envelope at your earliest convenience.

Please use the back of this form for any additional contact information or details about your well