



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT

## REQUEST FOR DETERMINATION OF NON-USE AQUIFER

### Instructions for Completion of Four Part Survey Form

Persons pursuing remediation of sites under the Waste Management and Environmental Remediation Standards Act (Act 2) may request Department determination that the groundwater is not used or currently planned to be used (Ref. 250.303(b)). The area to be evaluated includes the property to be remediated and within a radius of 1,000 feet downgradient of the points of compliance, plus any additional areas to which contamination has migrated or might reasonably migrate in concentrations which exceed the Used Aquifer Statewide Health Standards. Within this area, referred to as the "described area", information must be provided regarding present and currently planned groundwater use from sources located in the described area. In addition, the existence of a community water system well source or a Department designated Zone II wellhead protection area located within a radius of 1 mile of the described area, must be identified on a map of appropriate scale to show required features. The described area must be more than 1/2 mile from a community water supply well source and must not intersect a Zone II wellhead protection area.

Completion of the four part survey process (Form A, Form B, Form C and Form D) provides a mechanism to submit essential information to the Department. This document is offered to assist site remediators as they prepare a request for Department determination. Following this format is not a regulatory requirement; it merely represents an optional framework to assemble relevant information as you prepare your request. Persons remediating sites must demonstrate that all relevant regulatory criteria have been met for Non-Use Aquifer designation. Upon review of this data, the Department must determine in writing the existence of a Non-Use Aquifer.

Form A - Provide rationale for delineation of the described area, including any fate and transport analysis used.

Form B - Use to survey all existing parcels within the described area. Complete one sheet for each parcel. Communication with the property owner will be necessary. *(A good source for completing a comprehensive evaluation checklist is the tax maps for the area surrounding the particular site.)*

Form C - Use to survey all undeveloped parcels within the described area in addition to Form B. Contact with the local municipality or county planning agency with new land development jurisdiction will be needed. County tax assessment information may be necessary as well. *(A good source for completing a comprehensive evaluation checklist is the tax maps for the area surrounding the particular site.)*

Form D - Use to provide information on the existence and location of all community water supply service areas (both current and proposed) and the existence of any Zone II wellhead protection areas within the requisite distance from the described area.

Finally, provide a map or maps which depict the cleanup site, the described area, and includes representation of these features:

1. Location of property and site to be remediated and its point of compliance (property boundary).
2. Locations and extent of area to which contamination can reasonably be expected to migrate before attenuating to the Used Aquifer standard.
3. Developed parcels: identify with name used on evaluation Form B.
4. Undeveloped parcels: identify with name used on evaluation Form C.
5. Location of all wells or springs.
6. Location of surface water intakes for drinking water or production purposes, streams, rivers, or surface waters.



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## NON-USE AQUIFER DETERMINATION SURVEY

### FORM A - DELINEATION OF "DESCRIBED AREA"

The information for this form is provided to help the Department understand how the delineation of the described area was developed. Basic information to be provided to the Department includes: the fate and transport analysis used to determine the extent to which contamination is likely to migrate; the conceptual model which will include map(s); description of how the model was calibrated and what data was used, including the source of the data; and cross sections of sufficient detail to depict the horizontal and vertical extent of the plume(s) migration. For any computer models, provide the input data and documentation of the model used in the fate and transport analysis. Provide a copy of the software used in the determination.

#### Requested Information

For questions 2 and 3, please provide information on this form or on a separate sheet or sheets. The maps and cross sections should be attached.

1. Attach scaled maps and cross sections of sufficient detail of the described area.
2. Provide the rationale upon which delineation of the described area is based.
3. Provide the information on the fate and transport analysis. If a computer model is used, provide the data and model to the Department on a 3 1/2" computer disk.

DEP USE ONLY  
TANK FAC ID# \_\_\_\_\_  
LRP ID# \_\_\_\_\_

### NON-USE AQUIFER DETERMINATION SURVEY FORM B: PROPERTY EVALUATION (All Parcels)

(Complete one survey form for the site to be remediated and one form for each parcel downgradient and within the "Described Area".)

Property Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ County \_\_\_\_\_

#### GROUNDWATER USE INFORMATION

	<b>Yes</b>	<b>No</b>
*Is there currently a well or spring on the property?	<input type="checkbox"/>	<input type="checkbox"/>
Is the well or spring used for drinking water?	<input type="checkbox"/>	<input type="checkbox"/>
Is the well or spring used for agricultural purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Is a well or spring being planned for drinking water or agricultural purposes?	<input type="checkbox"/>	<input type="checkbox"/>

Describe any other current or planned groundwater use: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Describe current, planned, and future anticipated site use: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

	<b>Yes</b>	<b>No</b>
Is the property connected to a community water system?	<input type="checkbox"/>	<input type="checkbox"/>

If yes, name the system: \_\_\_\_\_

SOURCE OF SURVEY INFORMATION: \_\_\_\_\_

SURVEY CONDUCTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

\*If a well or spring exist, indicate depth and construction details, if available.

## NON-USE AQUIFER DETERMINATION SURVEY

### FORM C: PROPERTY EVALUATION (Undeveloped Parcels)

This survey form focuses on undeveloped parcels or tracts within a radius of 1,000 feet downgradient of the points of compliance plus any additional areas contamination has migrated or might reasonably migrate in concentrations that exceed Used Aquifer Statewide Health Standards. Persons seeking Non-Use Aquifer determinations must evaluate current, planned, or future groundwater uses for undeveloped parcels within the “described area.” The evaluation of planned groundwater use requires information on both existing and pending new land development/subdivision proposals and any municipal facility plans such as sewage facilities plans and/or water use plans. Authority for these plans may reside with the local municipality (city, borough, township) or, in the absence of any local land use planning, the county may exert authority through a county planning commission. Proper completion of this survey form will require contact with the appropriate local or county agencies and a review of available land development/subdivision and facility plans.

#### Requested Information

On a separate sheet or sheets, please provide requested information for each of the following questions. Provide information requested by question 4 directly on this sheet.

1. How many undeveloped parcels exist within the “described area?” Provide present property owner name, address, and county tax assessment parcel number for each tract. If no undeveloped parcels exist, further completion of this form is unnecessary. Be sure that Form B Property Evaluation is also completed for each parcel.
2. Do any approved land development or subdivision plans and/or municipal facilities plans note reliance on groundwater for either drinking water or agricultural purposes? If yes, identify the parcels and describe the nature of groundwater use.
3. Do any pending land development or subdivision plans and/or proposed municipal facility plans project reliance on groundwater for either drinking or agricultural purposes? If yes, identify the parcels and describe the nature of groundwater use intended.
4. Identify the name of the local municipality and/or county planning agency with land development or subdivision jurisdiction from which the above information was obtained. Provide documentation from the municipality verifying the information.

Name of Agency: \_\_\_\_\_

Name and Title of Agency Staff

Person Who Provided Information: \_\_\_\_\_

5. If there are undeveloped tracts apparently not associated with a subdivision or new land development activity, contact the current property owner and obtain information on any current or planned groundwater use for drinking or agricultural purposes either by the property owner or intended through future subdivision activity. Identify the property owner interviewed and the information obtained on a separate sheet of paper for each property.

# NON-USE AQUIFER DETERMINATION SURVEY

## FORM D: Proximity to Community Water Sources/ Wellhead Protection Areas

Site remediators must ensure that the “described area” does not intersect a radius of 1/2 mile from a community water supply source or intersect an area defined as a Zone II wellhead protection area. Key locational information exists with the Department’s Water Supply Management Program in each regional office. To access this information, please provide the below requested data and return this form to your regional Environmental Cleanup Program office.

- ◆ Name of Site/Responsible Party: \_\_\_\_\_
- ◆ Location of site: (Municipality/County): \_\_\_\_\_
- ◆ Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_
- ◆ Attach a copy of a 7.5° USGS topographic map which identifies the site and any community water system well source or Department designated Zone II wellhead protection area located within a radius of one mile of the described area. In addition, attach another map of sufficient detail which depicts the contaminant plume and any additional areas to which contamination might reasonably migrate in concentrations that exceed Statewide Health Standards for Used Aquifers.

Consultant/Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Nearest Water Supply Purveyor: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

	<b>Yes</b>	<b>No</b>
Does the described area intersect a radius of ½ mile from a community water supply well source?	<input type="checkbox"/>	<input type="checkbox"/>
Does the described area intersect an area designated as a Zone II wellhead protection area?	<input type="checkbox"/>	<input type="checkbox"/>