

Name: _____ Property Address: _____

PFAS Private Drinking Water Well Questionnaire

The following information will assist the Navy in completing this off-base drinking water investigation.

If your property uses groundwater for drinking and cooking, please complete as much of the questionnaire as possible online at <https://go.usa.gov/xwfdW>, or you may provide the information when scheduling your drinking water sampling appointment or by providing the completed form to the Navy sampling team when the drinking water sample from your property is collected.

If you do not own this property, please complete questions 1 and 2 online at <https://go.usa.gov/xwfdW>, or you may return the questionnaire to the Navy. If you do not have a drinking water well, please complete the questionnaire by answering "no" to question 3. You can submit the questionnaire online, or you may return it to the Navy by email to the Navy Public Affairs Office, NAVFAC_ML_PAO@navy.mil, or by mail to NAVFAC MIDLANT Public Affairs, Naval Station Norfolk, Bldg. Z-140, Norfolk, VA 23511.

1. Do you own the property? YES NO
2. If you do not own the property, please provide the name and best contact phone number of the owner:

3. Do you have a drinking water well on your property? YES NO. If "YES," please complete questions 3a, 3b, 3c, 3d, and 3e. If "NO," please proceed to question 4.
 - a. Do you have more than one well (e.g., additional well for irrigation or livestock)?

 - b. Is there an outdoor spigot available for sampling? YES NO
 - c. Have you upgraded your drinking water system in any way? YES NO. If "YES," please specify (e.g., storage tanks, water treatment)

 - d. Do you have well construction information on your drinking water well (e.g., when it was installed, well depth, well location, and screen length)? YES NO. If "YES," please provide details (and provide a copy of the construction log if available):

 - e. Do you share your private well water with other residents outside your property? YES NO
4. Do you obtain your drinking water from a community well that serves more than one property? YES NO
If "YES," please provide location of community well and the contact information for the drinking water system operator. _____
5. Is there more than one home or apartment on this property? YES NO. If "YES," how many homes? How many apartments?

6. Will you share your email address and phone number for future contact? YES NO
Email: _____ Phone number(s): _____