



MONITORING WAIVER APPLICATION MODULE 6 –WAIVER RENEWAL REQUEST

A. General:					
Entry Point (EP) ID #: _____ (Please complete a separate form for each EP)					
A waiver renewal is being requested for the following:					
<input type="checkbox"/> IOCs: (Please check all that apply)					
<input type="checkbox"/> Antimony	<input type="checkbox"/> Cadmium	<input type="checkbox"/> Mercury			
<input type="checkbox"/> Arsenic	<input type="checkbox"/> Chromium	<input type="checkbox"/> Nickel			
<input type="checkbox"/> Barium	<input type="checkbox"/> Cyanide	<input type="checkbox"/> Selenium			
<input type="checkbox"/> Beryllium	<input type="checkbox"/> Fluoride	<input type="checkbox"/> Thallium			
<input type="checkbox"/> Entry Point Asbestos <input type="checkbox"/> Distribution Asbestos <input type="checkbox"/> VOCs: (with a previous detect) <input type="checkbox"/> PFAS: (with a previous detect; please check all that apply)					
<input type="checkbox"/> PFOA			<input type="checkbox"/> PFOS		
<input type="checkbox"/> SOCs: (Please check all that apply)					
U	S		U	S	
<input type="checkbox"/>	<input type="checkbox"/>	2, 3, 7, 8 – TCDD (Dioxin)	<input type="checkbox"/>	<input type="checkbox"/>	Endrin
<input type="checkbox"/>	<input type="checkbox"/>	2,4-D	<input type="checkbox"/>	<input type="checkbox"/>	Ethylene Dibromide
<input type="checkbox"/>	<input type="checkbox"/>	2,4,5-TP	<input type="checkbox"/>	<input type="checkbox"/>	Glyphosate
<input type="checkbox"/>	<input type="checkbox"/>	Alachlor	<input type="checkbox"/>	<input type="checkbox"/>	Heptachlor
<input type="checkbox"/>	<input type="checkbox"/>	Atrazine	<input type="checkbox"/>	<input type="checkbox"/>	Heptachlor epoxide
<input type="checkbox"/>	<input type="checkbox"/>	Benzo(a)pyrene	<input type="checkbox"/>	<input type="checkbox"/>	Hexachlorobenzene
<input type="checkbox"/>	<input type="checkbox"/>	Carbofuran	<input type="checkbox"/>	<input type="checkbox"/>	Hexachlorocyclopentadiene
<input type="checkbox"/>	<input type="checkbox"/>	Chlordane	<input type="checkbox"/>	<input type="checkbox"/>	Lindane
<input type="checkbox"/>	<input type="checkbox"/>	Dalapon	<input type="checkbox"/>	<input type="checkbox"/>	Methoxychlor
<input type="checkbox"/>	<input type="checkbox"/>	Di(ethylhexyl)adipate	<input type="checkbox"/>	<input type="checkbox"/>	Oxamyl (Vydate)
<input type="checkbox"/>	<input type="checkbox"/>	Di(ethylhexyl)phthalate	<input type="checkbox"/>	<input type="checkbox"/>	PCBs
<input type="checkbox"/>	<input type="checkbox"/>	Dibromochloropropane	<input type="checkbox"/>	<input type="checkbox"/>	Pentachlorophenol
<input type="checkbox"/>	<input type="checkbox"/>	Dinoseb	<input type="checkbox"/>	<input type="checkbox"/>	Picloram
<input type="checkbox"/>	<input type="checkbox"/>	Diquat	<input type="checkbox"/>	<input type="checkbox"/>	Simazine
<input type="checkbox"/>	<input type="checkbox"/>	Endothall	<input type="checkbox"/>	<input type="checkbox"/>	Toxaphene
U = Use Waiver S = Susceptibility Waiver (groundwater sources only)					

B. Waiver Renewal Criteria:

(Please complete all applicable sections)

1. IOCs:

- a. Does monitoring data from the previous compliance period indicate that IOC levels are reliably and consistently below the MCL?

☐ YES ☐ NO

- b. Have there been any changes in the following:

- Groundwater pumping rates?
(i.e., an increase in the pumping rate or daily usage) ☐ YES ☐ NO
- System's configuration or operating procedures?
(i.e., sources added/removed from service, changes to treatment) ☐ YES ☐ NO
- Stream flows or characteristics?
(i.e., adverse changes to water quality, changes to stream designation) ☐ YES ☐ NO
- Changes in land uses? ☐ YES ☐ NO

Please explain any changes:

2. VOCs:

- a. Does monitoring data from the previous compliance period indicate that VOC levels are non-detected?

☐ YES ☐ NO

- b. Have there been any changes to the land uses and/or substances/products used?

☐ YES ☐ NO

Please explain any changes:

If answering yes to Question 2b, please check all land uses located within each Zone II area.

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Land Uses that Potentially Generate VOCs					
	Source	Source	Source	Source	Source
Airports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Above/below ground heating oil tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Auto repair facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bulk fuel/oil storage, or gas stations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dry cleaning facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities that use/generate/store chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furniture refinishing facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial parks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Junk or salvage yards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landfills or dumps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roadways or railroad tracks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. PFAS:

a. Does monitoring data from the previous compliance period indicate that PFOA and/or PFOS levels are non-detected?

PFOA ☐ YES ☐ NO ☐ N/A

PFOS ☐ YES ☐ NO ☐ N/A

b. Have there been any changes to the land uses and/or substances/products used?

☐ YES ☐ NO

Please explain any changes:

If answering yes to Question 3b, please check all land uses located within each Zone II area.

Land Uses that Potentially Generate PFAS					
	Source	Source	Source	Source	Source
Agricultural/crop farm with biosolids application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Airport or military airfield	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical production/storage facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial manufacturing facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Firefighting training facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landfill or dump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NPDES discharge point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paper manufacturing facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plastics manufacturing facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Textile manufacturing facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waste incineration facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. SOCs:

a. Does monitoring data from the previous compliance period indicate that SOC levels are non-detected?

☐ YES ☐ NO ☐ N/A

b. Have there been any changes to the land uses and/or substances/products used?

☐ YES ☐ NO

Please explain any changes:

If answering yes to Question 4b, please check all land uses located within each source protection area.

Land Uses that Potentially Generate SOC's					
	Source	Source	Source	Source	Source
Agricultural/crop farm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquatic pesticide application area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical production/storage facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dairy or livestock farm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Golf course or nursery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landfill or dump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lawn care or garden application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NPDES discharge point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plastics manufacturing facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roadway or railroad tracks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility right-of-way	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waste incineration facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wood preserving facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Asbestos:

a. Have any new sources been added which are vulnerable to asbestos contamination?

☐ YES ☐ NO ☐ N/A

b. If A/C pipe is present, has optimized corrosion control treatment been maintained?

☐ YES ☐ NO ☐ N/A

6. Dioxin:

Are there any potential sources of dioxin located within 1,000 feet of a groundwater source or within one mile upstream of a surface water source?

☐ YES ☐ NO

7. PCBs:

Are there any potential sources of PCBs located within 1,000 feet of a groundwater source or within one mile upstream of a surface water source?

☐ YES ☐ NO

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C. Source Water Protection Information:

If there have been any changes to land uses and/or substances/products used, please complete Module 7 (Site Map and Land Use Inventory) for each source and identify all land uses.

Please describe the steps taken to determine whether any changes have occurred to the land uses and/or substances/products being used:

D. Certification:

The information contained herein is true and correct to the best of my knowledge, information and belief. The information given is subject to the penalty provisions of the Crimes Code regarding unsworn falsification to authorities (49 P.S. § 4904).

Signature

Date