

COUNTY OF SUFFOLK



STEVEN BELLONE
SUFFOLK COUNTY EXECUTIVE

DEPARTMENT OF HEALTH SERVICES

JAMES L. TOMARKEN, MD, MPH, MBA, MSW
Commissioner

Dear Suffolk County Resident:

The Department of Health Services provides sampling and analytical services for testing drinking water supplies in Suffolk County. Your drinking water can be analyzed for microbiological quality, inorganic chemical content, volatile organic compounds, petroleum products and certain pesticides. The fee schedule established for private well testing is itemized below:

1. \$100.00 is the fee for sample collection and water quality analysis for any existing private well, which has previously been approved by the department, or serves a residence with a valid Certificate of Occupancy. By act of the county legislature, households with a cumulative family income of less than \$25,000 can be exempted from the fee, provided they sign and have notarized the enclosed *Request for Exemption*. The enclosed bulletin contains additional information and answers to some common questions concerning the well testing program. The results of the analysis and a cover letter containing our recommendations will be sent for each well tested.
2. \$350.00 is the fee for sample collection and water quality analysis for any private well which serves new construction, or which has not received final approval from the department, or for which a valid Certificate of Occupancy has not been obtained.
3. No fee is charged if the request is to test only for the potato pesticide aldicarb (Temik) in agricultural areas where Temik was used. However, the department recommends that all private wells have a periodic comprehensive analysis to determine the safety of your drinking water.

If you wish to have your well analyzed, carefully complete the yellow request form, including your tax map location. Please sign the form and return it to this office with either:

- A. Your check made out in the appropriate amount (\$100 or \$350) to the:
"Suffolk County Environmental Health", or
- B. For testing under Item #1 above, your signed and notarized exemption statement.

In most instances, a sample can be collected in approximately eight (8) weeks of receipt of your check. Please allow eight (8) weeks or more from the date the sample is collected to receive the results of your analysis in the mail. The record of our testing may be available to the public under the Freedom of Information Law. If you desire other arrangements, there is a listing of commercial laboratories approved for drinking water on the reverse side of this letter.



Public Health
Prevent. Promote. Protect.

DIVISION OF ENVIRONMENTAL QUALITY
OFFICE OF WATER RESOURCES - 360 YAPHANK AVENUE, SUITE 1C - YAPHANK, NY 11980
PHONE: (631) 852-5810 - FAX: (631) 852-5787

**NEW YORK STATE DEPARTMENT OF HEALTH
APPROVED ENVIRONMENTAL LABORATORIES FOR DRINKING WATER IN
SUFFOLK COUNTY, NEW YORK**

January 24, 2014

DRINKING WATER APPROVALS

- | | | |
|----------------------|---------------------------------|-------------------------------|
| 1. Bacteriology | 5. Organohalide Pesticides | 9. Volatile Halocarbons |
| 2. Metals | 6. Methylcarbamate Pesticides | 10. Volatile Aromatics |
| 3. Non-Metals | 7. Miscellaneous (7A. Asbestos) | 11. Microextractables |
| 4. Chlorinated Acids | 8. Trihalomethanes | 12. Polychlorinated Biphenyls |
| | | 13. Disinfection Byproducts |

American Analytical Laboratories
56 Toledo Street, Farmingdale, NY 11735
Telephone: 631-454-6100

***Approvals: 2 (partial), 3 (partial), 7 (partial),**

Enviroscience Consultants, Inc.
2150 Smithtown Avenue Suite 3, Ronkonkoma, NY 11779
Telephone: (631) 580-3191

***Approvals: 7A**

Pace Analytical (formerly H2M Laboratory)
575 Broadhollow Road, Meville, NY 11747
Telephone: 631-694-3400
(Water Collection Agent: Harry Goldman Water Testing:631-298-4640)

***Approvals: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13**

Long Island Analytical Laboratory
101-4 Colin Drive, Holbrook, NY 11741
Telephone: 631-472-3400
(Water Collection Agent: John Hallman LTD:631-749-0195)
(Water Collection Agent:Microsoft Inc.631-725-6425)
(Water Collection Agent:Maximum Environmental Management:631-589-1225)

***Approvals: 1, 2, 3, 8, 9, 10, 13 (partial)**

The above is based on information obtained from the Environmental Approval Program of the New York State Department of Health. A complete listing of other potable water laboratories is available online at www.wadsworth.org/labcert/elap/comm.html.

This information is supplied with the understanding that no discrimination is intended and no endorsement by the Suffolk County Department of Health Services is implied.

*Please note that laboratories may sub-contract with other certified laboratories for parameters they are not approved to test for.

Non-community and Community Water Suppliers: The laboratory you contract with must be supplied with your Federal ID#. Only a trained water sample collection agent or certified water treatment plant operator may collect samples for regulatory purposes.

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WELL TESTING PROGRAM

To help residents with private wells determine the quality of their drinking water, the Suffolk County Department of Health Services operates an extensive water testing program. There are approximately 77,000 individual private wells serving over 200,000 people in Suffolk County. Due to the large number of requests that the county receives for water analyses, there is a charge for the service.

DRINKING WATER QUALITY

In the past, the news media has provided volumes of coverage to incidents of groundwater contamination. Some people may have gotten the impression that our entire water supply is contaminated. In fact, the media coverage of well contaminations is news because most residents have high quality drinking water and want it to stay that way. There are many laws and programs designed to help preserve and protect the region's groundwater supply.

Although testing by the department has discovered many instances of severe well water contamination, not every private well has a problem. Our analyses show that the majority of wells tested in Suffolk County meet drinking water standards that have been set for health-related reasons. Of course, natural waters sometimes contain constituents such as iron and manganese which can be objectionable aesthetically, but are not normally considered harmful to health.

The only way to determine the quality of a private well is to have the water tested. When a nearby well is found to be contaminated, it does not automatically mean that your well is similarly contaminated. The complexities of the hydrogeology of the area necessitate the sampling of each individual well to determine water quality.

On the request form, you are asked to supply your family physician's name and address so that he or she can be informed of any problems with your water supply and can include this information in your medical records.



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QUESTIONS FREQUENTLY ASKED ABOUT THE TESTING PROGRAM

What will my well water be tested for?

Your water will be tested for basic potability including those chemical parameters that have been found to frequently occur in past testing by the department. Analyses usually performed are: microbiological quality, inorganic chemical content, volatile organic compounds and petroleum derivatives. If you live in an agricultural area your water can also be tested for carbamate pesticides.

How often can my water be tested?

Due to the great number of private wells in the county and the extensive analysis performed, the department reserves the right to limit the frequency of which your well can be tested. You can have your water tested by a commercial laboratory at any time. The county will test only your primary drinking water well, requests to test irrigation wells cannot be honored.

What if I have a water filter?

The county does not encourage the use of water filters which do not meet New York State or Suffolk County standards. Usually the raw or unfiltered water will be tested unless the department or applicant has requested otherwise.

Can I deliver a sample of my water to speed up the process?

No. The sample must be collected by department personnel according to proper sampling protocol in specially prepared containers and in accordance with procedures established for quality control.

What should I do until my water is tested?

If you are unsure if your water is safe for consumption, use bottled water or water from an approved public supply until the analysis is complete. It takes several weeks before you are notified of your results. A letter explaining the analysis will be mailed to the address indicated on the request form.

What if I am selling my home and need a water analysis right away?

For homes involved in a resale, it is suggested that a commercial laboratory be used. The department cannot ensure that you will receive test results in time to meet contract or closing dates.

I work during the day and cannot be home to wait for sample collection.

A sample can be collected from an outside tap or hose bib if one is available. Locked fences or loose dogs sometimes prevent sampling. Be sure the electric is on so that the water pump may be run for a few minutes to flush any stale water from the lines.

What can I do if my well water is contaminated?

The department will suggest some possible remedies depending on the type and amount of contaminants detected. However, the department cannot mandate any public agency to take corrective action, extend public water or supply bottled water to you. Generally, the owner of a private well is responsible for his own water supply. In severe cases of contamination financial aid may be available from federal (USEPA) or state (NYS DEC) programs. If you are a tenant, your landlord may be responsible for providing a potable water supply.

**REQUEST FOR EXEMPTION
FROM THE PRIVATE WELL TESTING FEE
& AFFIDAVIT OF FAMILY INCOME**

NAME _____

ADDRESS _____

I hereby request an exemption from the Suffolk County Department of Health Services private well testing fee.

FAMILY INCOME AFFIDAVIT

STATE OF NEW YORK]

COUNTY OF SUFFOLK] SS:

_____, being duly sworn, deposes and says:

1. I reside at the above described address.
2. I have requested that the well water at these premises be tested by the Suffolk County Department of Health Services.
3. I have further requested that the fee for the well water testing be waived.
4. My cumulative family income, exclusive of any public assistance payments or form of governmental monetary aid, does not exceed \$25,000.
5. I agree to provide satisfactory written documentation or copies of my income tax returns to verify my household income, if requested.

Signature _____

SWORN TO BEFORE ME

THIS DAY OF

NOTARY PUBLIC



OFFICE OF WATER RESOURCES
DIVISION OF ENVIRONMENTAL QUALITY - 360 YAPHANK AVENUE, SUITE 1C - YAPHANK, NY 11980
PHONE: (631) 852-5810 - FAX: (631) 852-5787

PR# _____
(For SCDHS use only)

REQUEST FOR PRIVATE WELL WATER ANALYSIS

Date Rec'd. by SCDHS _____

RETURN TO:
SUFFOLK COUNTY DEPARTMENT OF HEALTH SERVICES
BUREAU OF DRINKING WATER
360 YAPHANK AVENUE, SUITE 1C, YAPHANK, NY 11980
PHONE: (631) 852-5810



Fee Enclosed:
\$100 _____
\$350 (C.O.) _____
Exempt _____

PLEASE PRINT CLEARLY ABOVE THE LINE

OWNER

TENANT

LAST NAME

FIRST NAME

HOUSE OR BOX NUMBER

STREET NAME

VILLAGE

ZIP CODE

HOME PHONE #

BUSINESS PHONE #

TAX MAP NUMBER (From your tax bill)

District

Section

Block No.

Lot No.

WELL DEPTH (If known)

DEPTH TO WATER (If known)

AGE OF WELL (If known)

WELL CASING DIAMETER

SPECIFY TYPE OF WATER FILTER INSTALLED, IF ANY

Please check all appropriate water treatment boxes:

- Carbon
- Iron and/or manganese removal/treatment
- Reverse osmosis (nitrates)
- Cartridge/sediment filter
- pH Control
- None

Well Installed by (if known): _____

Date Installed (if known): _____

RESIDENT'S MAILING ADDRESS

OWNER'S ADDRESS

Health Services Reference No. _____
(New construction/Certificate of Occupancy (C.O.) only)

M.D. Request Enclosed Yes _____ No _____

Reason for Request: Rusty _____ Odor _____
Off-taste _____ Blue staining _____ Gen'l. Concern _____
New construction _____ Other _____

Is your name or house number visible from the street:
Yes _____ No _____

Is an outside tap (hose bib) available for sampling?
No _____ Yes _____ Located _____

Are there any infants less than one year old or pregnant women
in your house? Yes _____ No _____

Is the request for an aldicarb (Temik) pesticide test only?
Yes _____ No _____

Do you have a Temik filter? Yes _____ No _____

If yes, date last sampled by Health Dept.: _____

Filter No.: _____

Signature of resident or owner

DIRECTIONS TO YOUR HOME (Use other side if necessary):

Nearest cross street: _____

Directions and/or map: _____