



CENTER FOR ENVIRONMENTAL HEALTH

Dr. Robert L. Yeager Health Center
50 Sanatorium Road, Building D
Pomona, New York 10970
Phone: (845) 364-2608 Fax: (845) 364-2025



Public Health
Prevent. Promote. Protect.

EDWIN J. DAY
County Executive

SAMUEL J RULLI, PE
Director, Environmental Health

Private Well Location:

Street Address: _____ Town or Village _____ Zip Code: _____

Section: _____ Block _____ Lot: _____

Date Contract of Sale Signed: _____

Date Test Ordered by Seller: _____ Laboratory Name: _____

Date Seller Received Results: _____
(If results not yet available, provide date results are due from laboratory.)

Date Seller Submitted Results to Buyer: _____
(If results not yet available, provide date by which results will be submitted to buyer.)

Date Test Results Submitted to RCDOH _____
(Based upon information provided by laboratory. If results not yet available, provide date by which results will be submitted to RCDOH.)

Date of Real Property Transfer: _____

Certification of Compliance:

The undersigned hereby certify that the information presented above is true and accurate to the best of their knowledge and belief, and that water testing has been, or will be conducted at the private well located on the above-referenced parcel in accordance with all requirements of Chapter 389 of the Laws of Rockland County, New York.

Seller(s):

Signature _____ Printed Name _____ Date: _____

Signature _____ Printed Name _____ Date: _____

Buyer(s):

Signature _____ Printed Name _____ Date: _____

Signature _____ Printed Name _____ Date: _____

Notary Seal:

Please return completed form within one month after the date of closing to the Rockland County Department of Health Private Well Testing Law-Affidavit of Compliance at the address listed above. For questions, call 845-364-3173.