



**LANDOWNER REQUEST TO WAIVE
 WELL DEVELOPMENT IMPOUNDMENT
 RESTORATION REQUIREMENTS**
 (Unconventional Operations Only)

A. LANDOWNER IDENTIFICATION			
Name			
Address			
City	State	Zip Code	
Telephone No.	Fax No.	Email	
Tax Parcel ID No.			
B. OPERATOR IDENTIFICATION			
Name		DEP ID / OGO No.	
Address			
City	State	Zip Code	
Telephone No.	Fax No.	Email	
C. WELL DEVELOPMENT IMPOUNDMENT IDENTIFICATION			
Impoundment Name			Date Constructed
County		Municipality	
Latitude (DD)		Longitude (DD)	

D. LANDOWNER REQUEST SIGNATURE AND NOTARIZATION

I, the undersigned landowner of the land on which above listed well development impoundment is constructed, request the Department of Environmental Protection (DEP) to waive the requirement to restore a well development impoundment site to approximate original conditions provided that the liner is removed from the impoundment in accordance with 25 Pa. Code Section 78a.59b(g). I understand that I may be held liable for conditions on my property.

Landowner Signature	Print Name	Date
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Sworn to and subscribed to before me this	Commonwealth of Pennsylvania
_____ day of _____, 20_____	County of _____
_____	My Commission expires _____

DEP USE ONLY

<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Conditions <input type="checkbox"/> YES, see below or attached. <input type="checkbox"/> NO	Date
DEP Representative _____			

Conditions _____