

Aqueous Film-Forming Foam (AFFF) Products Liability Litigation (MDL 2873)

Public Water System Settlement Supplemental Claims Form

INSTRUCTIONS

Please follow the instructions below to submit a Supplemental claim for the AFFF Products Liability Litigation Settlement Program. A completed copy of this Supplemental Claims Form must be submitted no later than the December 31, 2030. Late Supplemental Claims Forms will not be considered.

A PWS should ONLY complete this Supplemental Claims Form for Impacted Water Sources (IWS) with a positive PFAS detection as of June 30, 2023 that either (a) experienced a change in state or federal MCL regulation or (b) the PFAS contamination levels have shifted from below MCL regulations to above MCL regulations.

TO RECEIVE BENEFITS FROM THIS SETTLEMENT, YOU MUST PROVIDE ALL OF THE REQUIRED (*) INFORMATION BELOW AND YOU MUST SIGN THIS CLAIMS FORM. THIS CLAIMS FORM SHOULD ONLY BE USED IF A CLAIM IS BEING MAILED IN AND IS NOT BEING FILED ONLINE. YOU MAY ALSO FILE YOUR CLAIM ONLINE AT www.PFASWaterSettlement.com.

For the Supplemental Claims Form to be valid, Claimants must provide ALL information requested concerning the Public Water System (PWS) and its groundwater wells and/or surface water systems ("Water Source").

Baseline Testing: Any Water Source tested for PFAS prior to U.S. EPA's announcement of the testing requirements of UCMR-5 (December 2021), that did not result in a detection of PFAS, must re-test to meet Baseline Testing requirements. If a Water Source tested for PFAS after U.S. EPA's announcement of the testing requirements of UCMR-5 using a methodology consistent with the requirements of UCMR-5 or applicable State requirements (if stricter) (the "Testing Methodology") and it did not result in a Measurable Concentration of PFAS, no further testing is required on that Water Source. Test results must be submitted from untreated (raw) water samples, except that a result showing a detection of PFAS in a treated (finished) water sample may be used. However, all samples must be drawn from a Water Source that has been used to provide Drinking Water. BY SUBMITTING THIS CLAIMS FORM, YOU CERTIFY THAT THE PWS ON WHOSE BEHALF YOU ARE SUBMITTING THE CLAIMS FORM HAS TESTED ALL OF ITS TEST SITES FOR PFAS AFTER U.S. EPA'S ANNOUNCEMENT OF THE TESTING REQUIREMENT OF UCMR-5 USING THE TESTING METHODOLOGY.

For any questions about this Supplemental Claims Form, you may contact a Claim Representative at 1-855-714-4341 or info@pfaswatersettlement.com. Claims Forms submitted by mail should be sent to the Claims Administrator at the following address:

AFFF Public Water System Claims
PO Box 4466
Baton Rouge, LA 70821

SECTION 1. PUBLIC WATER SYSTEM (PWS) INFORMATION

SECTION 1.1 PWS GENERAL INFORMATION

Public Water System (PWS) Name			
PWS Identification Number (PWSID)		Employer Identification Number	_ _ - _ _ _ _ _

SECTION 2. WATER SOURCE INFORMATION

Please complete and submit information from Section 2 for EACH Water Source. See "Addendum X" to provide information for each additional Water Source.

Note: Groundwater Well Impacted Water Sources should report Flow Rates from the Groundwater Well. Surface Water System Impacted Sources should report treatment capacity from the surface water treatment plant.

Name or description of the Water Source. <i>Note: This is the name or unique identifier listed on the testing laboratory chain of custody document.</i>	
Is this a groundwater well or surface water system? <i>*Please enter "Groundwater well" or "Surface water system."</i> <i>Note: Please enter "Surface water system" if a treatment plant is blending groundwater and surface water before treatment. Both systems are considered a surface water system.</i>	

Aqueous Film-Forming Foam (AFFF) Products Liability Litigation (MDL 2873)
Public Water System Settlement Supplemental Claims Form

SECTION 3. PFAS TESTING RESULTS

PFOA CONTAMINATION TESTING

Please enter the below information to indicate **PFOA** contamination testing results. *If this water source was not found to contain any PFAS at any level on or before June 30, 2023, leave this section blank and skip to Section 4: Certification and Signature.*

See Addendum X to provide information for each additional Water Source.

Highest historical PFOA concentration in lab-issued documentation:							
Date of Sampling:							
Company of the person who took the sample:							
Date of analysis:							
Highest historical PFOA concentration converted to parts per trillion (PPT):				_____ PPT			
Name of laboratory that performed the analysis:							
Facility address of laboratory that performed the analysis:		Street/PO Box					
		City		State		Zip	
What state or federal agency approved analytical method was used to measure the PFAS concentrations of the Impacted Water Source (e.g., EPA Method 537.1, EPA Method 537M)?							

PFOS CONTAMINATION TESTING

Please enter the below information to indicate **PFOS** contamination testing results. *If this water source was not found to contain any PFAS at any level on or before June 30, 2023, leave this section blank and skip to Section 4: Certification and Signature.*

See Addendum X to provide information for each additional Water Source.

Highest historical PFOS concentration in lab-issued documentation:							
Date of Sampling:							
Company of the person who took the sample:							
Date of analysis:							
Highest historical PFOS concentration converted to parts per trillion (PPT):				_____ PPT			
Name of laboratory that performed the analysis:							
Facility address of laboratory that performed the analysis:		Street/PO Box					
		City		State		Zip	
What state or federal agency approved analytical method was used to measure the PFAS concentrations of the Impacted Water Source (e.g., EPA Method 537.1, EPA Method 537M)?							

Aqueous Film-Forming Foam (AFFF) Products Liability Litigation (MDL 2873)

Public Water System Settlement Supplemental Claims Form

OTHER PFAS CONTAMINATION TESTING

Please enter the below information to indicate **other PFAS analyte** contamination testing results. If this water source was not found to contain any PFAS at any level on or before June 30, 2023, leave this section blank and skip to Section 4: Certification and Signature.

See Addendum X to provide information for each additional Water Source.

Highest historical concentration of one other PFAS analyte in lab-issued documentation:			
Date of Sampling:			
Company of the person who took the sample:			
Date of analysis:			
Highest historical concentration of one other PFAS analyte concentration converted to parts per trillion (PPT):	_____ PPT		
Name of laboratory that performed the analysis:			
Facility address of laboratory that performed the analysis:	Street/PO Box		
	City	State	Zip
What state or federal agency approved analytical method was used to measure the PFAS concentrations of the Impacted Water Source (e.g., EPA Method 537.1, EPA Method 537M)?			

SECTION 4. CERTIFICATION AND SIGNATURE

By signing this Claims Form, Settlement Class Member represents and warrants the following for the benefit of Settling Defendants:

- The Settlement Class Member has authority to release all Released Claims on behalf of itself and all other Persons who are Releasing Persons by virtue of their relationship or association with it.
- The Settlement Class Member authorizes the Claims Administrator and/or Special Master to take all necessary action to satisfy the Settlement Class Member's obligation with respect to Section 11.6 of the Settlement Agreement including, but not limited to, reporting any Allocated Amount in Box 3 of an IRS Form 1098-F and filing such forms with the IRS.

I hereby declare under penalty of perjury under the laws of the State of _____ that all of the information provided within this Claims Form and its attachments are true and correct to the best of my knowledge, information, and belief.

Authorized Representative's Signature:	
Authorized Representative's Printed Name:	

Executed this _____ day of _____ at _____ (County), _____ (State).

DOCUMENTATION REQUIREMENTS

Please submit **ALL** documentation reflecting the information provided above including the following:

1. Lab-issued documentation demonstrating historical maximum detections of PFOA, PFOS, and other PFAS analyte
2. Lab issued testing chain of custody document
3. A duly completed and executed IRS Form W-9 (or other information return required pursuant to Treasury Regulations Section 1.6050X-1(a)(1)) for the PWS with respect to each Settling Defendant.
4. A duly completed written statement that satisfies the requirements of Treasury Regulations Section 1.6050X-1 (c) with respect to each Settling Defendant.
5. A written authorization substantially in the form of Exhibit K attached to the Settlement Agreement for the Claims Administrator to file the forms set forth in item (3) with the IRS and to provide the written statements set forth in item (4) to each Settling Defendant.