



Eligibility and Interest Form

Thank you for your interest in protecting your household from PFAS (per- and polyfluoroalkyl substances). Please complete the questions below to help us determine your eligibility for a free household/business water filter and/or free well water testing, using fiscal year 2026 NM Legislative funds focused on PRIVATE WELLS contaminated with PFAS.

Applicant Information

Name:
Phone:
Email:
Address:
City / Zip code:

1. What is your primary water source? (circle or check one)

☐ Private well ☐ Public water utility ☐ I don't know

2. Has your (private) well water been tested for PFAS?

☐ Yes (if Yes, when? _____) ☐ No ☐ I don't know

3. If yes, what were the test results?

☐ Positive (PFAS detected) ☐ Non-detect ☐ I don't know

4. If eligible for the program, are you interested in a household water filter?

☐ Yes ☐ No

5. Are you interested in having your (untested) Private Water Well tested for PFAS?

☐ Yes ☐ No

Optional Comments:

PRIVATE WELL PFAS PROTECTION PROGRAM: NMED CONTACT INFO:
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