

# Water Well Permit Application

Well Location: \_\_\_\_\_  
Street Address City State ZIP

Permit Request:  Drill  Repair  Deepen  Plug  GeoThermal

Owner: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ License No: \_\_\_\_\_ Exp: \_\_\_\_\_

Driller/Pump Installer: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Installer Address: \_\_\_\_\_ Email: \_\_\_\_\_

Well Contractor: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Phone: \_\_\_\_\_

Geologic Formation: \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

(Deg., Min., Sec.)

(Deg., Min., Sec.)

Sewage Disposal:  Sanitary Sewer  Anaerobic Septic System  Aerobic Septic System

Distance from Sewage Disposal: \_\_\_\_\_

Is the property served by public water system?  Yes  No

If yes, is there a cross-connection between the well and pump and the public water system?  Yes  No

Water Use:  Domestic  Commercial  Industrial  Irrigation  Agricultural

Public Water Supply  Monitoring  GeoThermal  Dewatering

Other \_\_\_\_\_

Estimated Water Use: \_\_\_\_\_ GPD or \_\_\_\_\_ GPM

Estimated Cost of Well: \_\_\_\_\_

Application Submittal Package must include the following:

- Driller's License
- Legal description of the property (Plat or Survey)
- Construction diagram for new well construction and/or plugging
- Two licensed laboratory reports indicating well is bacteriologically safe (2 samples, 2 weeks apart)
- Site map or Satellite photo reflecting the location of the following:

Proposed Well	Septic System Drain Field and/or Spray Area
Existing Wells	Structures (e.g. buildings)
Property Lines	Neighboring Septic Systems (if closer than 50 ft)
Septic Tank	Any Other Sources of Contamination within 50 ft

**OWNER/APPLICANT CERTIFICATION (MUST BE NOTARIZED)**

I hereby certify that I have read and examined this application (including attached location information) and known the same to be true and correct.

**OWNER/APPLICANT MUST INITIAL EACH BOX BELOW TO BE COMPLIANT**

Inspections of well & related property by the City or its agents for potential safety threats, cross connections and sanitary sewer use are authorized by owner.	Testing or additional inspection of well at cost to permittee on annual basis may be required by City if contamination, failure, or substandard condition is suspected.
No water may enter City's sanitary sewer system without prior consent; such will be cause for metering/charge or disabling of the well.	Upon sale or transfer of the property, these conditions shall be binding as a covenant and restriction on the property; an issued permit will be filed with the County Clerk as such.

By signing this authorization, the applicant confirms that he/she agrees to comply with the local and state requirements regulating water wells.

\_\_\_\_\_  
Applicant Printed Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Office Use Only			
Date Received:		Received By:	
Fees Paid:		Permit Number:	
Date water utility operator inspected to verify no cross-connection between piping of the public water system and the private well:			
Date Private Well Operation Permit Issued:		Signature of Village Clerk:	