

Registration Statement for Express Geothermal Well Permit

Property Owner Information

Name _____

Address _____

Phone Number _____

Property Address _____

Directions to Property _____

Proposed Use of Well(s) _____

Well Driller Information

Name _____

Address _____

Phone Number _____

DPOR License Number _____

Water Well Pump Contractor License Number _____

Water Well System Provider Certification Number _____

I _____ being the owner of the above referenced property, grant the department access to the site for the purpose of inspecting the property and the well during and after the well installation until the well is approved by the department or any required corrections are made.

Owner's Signature _____

I _____ being the licensed well driller, certify that the location and construction of the well(s) will comply with the requirements of the Private Well Regulations.

Well Driller's Signature _____

A site plan, drawn to scale, showing the proposed well site(s), property boundaries, recorded easements, and accurate locations of actual or proposed sources of contamination (including but not limited to those listed in Table 3.1) within 100 feet of the proposed well site(s) is included with this Registration Statement. Yes _____ No _____

Registration Statement Received By:
Environmental Health Specialist _____

Date _____