

ENVIRONMENTAL HEALTH DIVISION **Application for Well Repair or Abandonment**

APPLICANT INFORMATIO		A J J		
City				
Applicant E-mail		Phone (H)	(C)	_
Owner Name		Address		_
City	State	Zip		
Owner E-mail		Phone (H)	(C)	
Property Location				_
Parcel ID#		PIN #		
• Type of Repair:	<u> </u>	nde Liner/packer blain)	-	
• If abandonment, ty	ype of well: D	rilled Bored/Hand	Dug	
ENVIRONMENTAL HEA	ALTH REQUIREMI	ENTS FOR PERMIT:		
• SUBMIT A SITE	DRAWING OF THE	E PROPERTY NOTING W	HERE THE WELL IS LOCATED	AND
ANY EXISTING I	BUILDINGS, DRIVI	EWAY(S), OUT BUILDING	G(S), ETC.	
• WELL CONTRAC	CTOR IS TO NOTIF	FY ENVIRONMENTAL HI	EALTH FOR AN INSPECTION	
APPOINTMENT.	AT LEAST 24 HOU	RS PRIOR TO INSPECTION	ON.	
and state officials are granterules. I understand that I am	ed right of entry to con a solely responsible fo	nduct necessary inspections to	rue, complete and correct. Authorize determine compliance and applicate labeling of all property lines and co	ole laws and
Signature	Owner / Owner's	s Agent	Date	
		<i>6</i>		
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