WELL CONSTRUCTION & DESTRUCTION – APPLICATION & PERMIT

Merced County Code Chapter 9.28

Merced County Division of Environmental Health
260 E. 15th Street, Merced, CA 95341 (209) 381-1100 fax: (209) 384-1593

PERMIT # _____

OWNER INFORMATION & DECLARATION

_____ (____) _____
name of property owner phone

_____
mailing address

_____
city state zip

Purpose of Well & Declaration (√ **all** that apply)**:**

Initial Well ☐ Additional Well ☐

Multiple Homes, School, or Business Well ☐

Replacement of Failed Well ☐

As property owner, I give permission to drill the well(s) indicated by this application. A plot plan indicating each existing and proposed well will be included. An application involving Additional Well, Replacement of Failed Well, or an out-of-service well will be accompanied by a Letter of Intent, signed by myself, for each existing well.

_____ _____
signature of property owner or trustee date

CONTRACTOR INFORMATION & DECLARATION

_____ (____) _____
name of contractor phone

_____
mailing address

_____
city state zip

Declaration:

I hereby affirm that I have a C-57 license in full force and effect under the provisions of the Business and Professions Code, Chapter 9, Division 3 (commencing with Section 7000) and the plot plan submitted with this application is accurate and representative of site conditions.

_____ _____
signature of contractor license #

CONSTRUCTION INFORMATION

Rotary/Rev. Rotary ☐ Cable Tool ☐ Other _____

Estimated Depth _____ ft. Casing Diameter _____ in.

Conductor Casing ☐

FEES

Total $_____ Check # _____

Date Paid _____ Invoice # IN_____

WELL LOCATION

_____ - _____ - _____ _____ / _____ / _____
APN township range section

_____ _____
street address city

_____ _____
subdivision name lot #

A plot plan shall be submitted with each application.

TYPE OF WELL

√ **all** squares and circles that apply

Test Well (w/temp. casing) – Private (T) ☐

Test Well (w/temp. casing) – Public (T) ☐

Domestic Well – Private (DO) ☐
For Dairy? ○

Domestic Well – Public (DO) ☐
For Dairy? ○

Irrigation Well (IR) ☐

Reconstruction (RE) ☐

Well Destruction (WD) ☐

Monitoring Well (M) ☐
To Check For Contamination? ○

Soil Boring (Test Hole) (B) ☐
To Check For Contamination? ○

Hydro Punch (HP) ☐
To Check For Contamination? ○

Cathodic Protection Well (CP) ☐

PERMIT CONDITIONS & COMMENTS

Letter(s) of Intent required ☐; Letter(s) received ☐

Maintain all setbacks. Request an inspection, with permit number, at least 24 hours prior to desired time.

_____

_____

_____

_____

Permit is valid for 180 days from the date of issuance.

APPROVAL

_____ _____
Signature of Environmental Health Official Date