

### Application for Permit for Private Water Supply

<b>Applicant</b>			
Owner/Agent Name:		Home Phone (    )    -	
Mailing Address		Work Phone (    )    -	
City	State	Zip Code	
Contractor's Name		License Number	
Contractor's Address		Phone (    )    -	
Contractor's City	State	Zip Code	
Common Address of Installation			
Legal Description	Lot	Block	Subdivision
Township:		Permanent Parcel Number:    -    -    -    ,	
_____ Quarter of the _____ Quarter of the _____ Quarter			
<b>Permit Type</b>			
<input type="checkbox"/> New Well	<input type="checkbox"/> Well Repair	<input type="checkbox"/> Deepen Existing Well	<input type="checkbox"/> Well Sealing
<b>Well Type</b>			
<input type="checkbox"/> Private Well	<input type="checkbox"/> Semi-Private Well	<input type="checkbox"/> Non-Community Well	
Number of Persons Served		Gallons of Storage	Pump Capacity
Type of Facility Served			
<b>New Well</b>			
Water Well Information		Casing Diameter    inches	Estimated Depth    ft
<b>Type of Well</b>			
<input type="checkbox"/> Drilled	<input type="checkbox"/> Driven	<input type="checkbox"/> Bored	<input type="checkbox"/> Other (Specify)
<b>Well Repair</b>			
<input type="checkbox"/> Install Pitless Adapter	<input type="checkbox"/> Drill Deeper	<input type="checkbox"/> Extend Well Casing	<input type="checkbox"/> Cap Well
Original Well Construction:	Casing Diameter:    inches	Estimated Depth:    ft	
<input type="checkbox"/> Pitless Adapter	<input type="checkbox"/> Well Pit	<input type="checkbox"/> Buried Seal	<input type="checkbox"/> Basement Offset
<input type="checkbox"/> Other (specify)			
I hereby certify that the information provided on this form is to the best of my knowledge, true and correct.			
Signature of Applicant		Print Name	Date

<b>For Office Use Only</b> IDPH County Code: 043	Permit Number	Fee Paid
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Well Location				
Sec: _____				
Twp: _____				
Rge: _____				
(Show location in section plat)				

PPN:	ID:	Date:
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