



Division of Environmental Health

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WATER WELL PERMIT APPLICATION
NEW CONSTRUCTION – MODIFICATION – REPAIR – DESTRUCTION

Application is hereby made to the Humboldt County Department of Health & Human Services, Division of Environmental Health (DEH) for a permit to construct, modify, or repair a water well as specified below in compliance with all county ordinances and state law regulating construction of water wells.	Permit Type: <input type="checkbox"/> New Construction <input type="checkbox"/> Modification <input type="checkbox"/> Destruction <input type="checkbox"/> Repair
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Applicant Name:	Owner's Name:
Mailing Address:	Mailing Address:
Phone Number:	Phone Number:
Email:	Email:
Parcel Number:	Intended Use: <input type="checkbox"/> Individual Domestic
Site Address: Street	<input type="checkbox"/> Community Water Supply <input type="checkbox"/> Agricultural
City & Zip	<input type="checkbox"/> Industrial <input type="checkbox"/> Other: _____
Directions to Site:	<input type="checkbox"/> Test Well Provide CEQA Project No.

- Terms of Permit**
1. Work on a well shall not be started prior to approval of the Water Well Application by DEH.
 2. Any changes made to the location of a new well shall be approved by DEH prior to commencement of drilling.
 3. DEH personnel will be notified a minimum of **24 hours** prior to sealing the annular space to arrange for final inspection. Drillers who anticipate completing a well in less than one day shall notify DEH 24 hours prior to commencement of drilling and provide the anticipated time to commence the sealing of the annular space. Should situations arise that prohibit a final inspection at the appointed time, DEH may allow a seal to be tremied or placed without inspection. In such cases, **no seal shall be tremied or placed until permission to proceed is given by DEH.** Sanitary seals placed without the benefit of DEH inspection shall require photo documentation demonstrating adequate installation for final approval.
 4. All drilling fluids and other drilling materials used in connection with the permitted work shall be disposed of in a safe and appropriate manner.
 5. The permittee shall maintain a copy of this permit on the drilling site during all stages of construction or destruction.
 6. Any deviation from the approved plan without prior approval from DEH may result in revocation of this permit.
 7. Well construction permits will expire three years after the date approved by DEH. Incomplete water well applications will expire one year after DEH staff completes a request to the applicant for more information.

- Special Provisions for Test Wells**
1. Test well construction permit applications will only be accepted if the property owner is the permit applicant.
 2. Test well permit applications will only be approved to support a pending CEQA project with another Lead Agency.
 3. Test wells are only to be used for information collection purposes and are not permitted for any other use. After completion of the well, seal and pump test, a permanent welded cap (PVC or steel) shall be installed onto the well casing and observed by DEH staff in order to receive final approval.
 4. Aside from completing necessary information collection, test wells shall not be used prior to receiving approval from the Lead Agency and obtaining a modification permit to convert the test well to a production well.
 5. If the CEQA project is cancelled, denied, revoked, or otherwise discontinued, the owner must obtain a permit, within six months of the decision, to destroy the well; destruction must be completed prior to expiration of the test well permit.

Drilling Contractor: _____	C-57 License No. _____
Mailing Address: _____	Phone Number: _____
Email Address: _____	

I hereby agree to comply with all laws and regulations of the County of Humboldt and the State of California Department of Water Resources Bulletin 74 pertaining to water well construction. I will contact Humboldt County Division of Environmental Health (DEH) when I commence work. Within 30 days after completion of work, I will furnish DEH a report of the work performed.

Well Driller Signature: _____	Date: _____
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WATER WELL DESIGN CRITERIA

Est. Boring Depth (ft.): Min. _____ Max. _____	Estimated Casing Depth (ft.): _____	Type of Sewage System:
Boring Diameter: (in.): _____	Casing Diameter (in.): _____	<input type="checkbox"/> Community Sewer
Depth of Seal (ft.): _____	Minimum Perforation Depth (ft.): _____	<input type="checkbox"/> OWTS (Septic)
Sealing Material: _____	Casing Material: _____	Distance from well site to OWTS (ft.): _____

Estimated Start Date: _____	Estimated Completion Date: _____
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I hereby acknowledge that I have read this application and that the information provided is correct. I hereby agree to hold harmless, defend and indemnify COUNTY and its agents, officers, officials, employees and volunteers from and against any and all claims, demands, losses, damages, liabilities, expenses and costs of any kind or nature, including, without limitation, attorney's fees and other costs of litigation, arising out of, or in connection with, negligent performance of, or failure to comply with, any of the duties and/or obligations contained herein resulting from the issuance of the permit and the conduct of the activities authorized under requested permit, except such loss or damage which was caused by the sole negligence or willful misconduct of COUNTY. I hereby grant 'right-of-entry' for inspection purposes. I agree to comply with all County Ordinances and State Law regulating construction of water wells.

Signature of Owner: _____ Date: _____

FOR OFFICE USE ONLY

Special Requirements and/or Comments:

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CEQA: <input type="checkbox"/> Exempt	Exempt Status: <input type="checkbox"/> Ministerial
	<input type="checkbox"/> Categorical. Type & Section No.
	<input type="checkbox"/> Emergency Project
<input type="checkbox"/> Project Approved by Lead Agency	<input type="checkbox"/> Confirmation Attached CEQA Project No. _____

Coastal Zone: Yes No

Amount Paid: <input type="checkbox"/> Cash	Project No.:	Site Approved By:
<input type="checkbox"/> Electronic: _____		Reviewed By:
\$ <input type="checkbox"/> Check: _____		

Date of Payment:	Receipt No.:	Site Approved Date
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Paid By: _____	Sealed to Depth of (ft.): _____
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Additional Amount Due: _____	Date Additional Amount Paid: _____	Seal Observed: <input type="checkbox"/> Yes <input type="checkbox"/> No
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CEQA Lead Agency: _____	Final Approved Date: _____
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**** WHEN FULLY APPROVED, THIS APPLICATION WILL BE THE PERMIT ****

PLOT PLAN CHECKLIST

Applicants must attach a Plot Plan to any Water Well Permit Application, showing the following within 200 feet of the well:

- Property lines
- Onsite wastewater treatment systems or works carrying or containing sewage
- All intermittent or perennial, natural or artificial bodies of water or watercourses
- The approximate drainage pattern of the property
- Other wells