

APPLICATION FOR PERMIT TO CONSTRUCT OR DEEPEN A WATER WELL

INCOMPLETE APPLICATIONS WILL BE RETURNED

INSTRUCTIONS ON REVERSE SIDE

1. Well Owner - Current Mailing Address
Name _____
Address _____
City/State/ZIP _____
Telephone Number _____

2. Well Contractor License # _____ / _____
Name _____
Address _____
City/State/ZIP _____
Telephone Number _____

3. Well Site: County _____ Township _____
Address _____ City _____ Lot # _____
Land ID # _____ Subdivision _____
Section _____ Township _____ Range _____ 1/4 of the _____ 1/4 of the _____ 1/4
Directions to Site _____
(If more space is needed see reverse side or place on additional sheet.)

4. **Propose to:** Construct or Deepen a Bored Driven Drilled
A. Private B. Semi-Private C. Non-Community Public Well
Proposed Use: Irrigation Domestic Commercial Livestock Other _____
Well Diameter _____ in. Estimated Depth _____ ft. Estimated Depth to Rock _____ ft.
Anticipated Aquifer: Sand and Gravel Limestone Sandstone Other _____
Proposed Casing: Type _____ Size _____ in. Estimated Amount _____ ft.
 Check if anticipated yield is greater than 100,000 gallons per day
Complete if B or C checked: Number of persons served _____ Type of Facility _____
(If C, an application For Permit to Construct, Alter or Extend a Non-Community Public Water Supply must be completed)

5. I certify that the attached information is complete and correct and that the work will conform to the current Illinois Water Well Construction Code.

Signature of Water Well Contractor Date

6. Pump Type _____
7. Pump Contractor _____ License # _____ Phone _____
Address _____ City/State/ZIP _____

I certify the work will conform to the current Illinois Water Well Pump Installation Code.

Signature of Pump Installation Contractor Date

ATTACH A SHEET WITH DIAGRAM OF WELL SITE SHOWING DIMENSIONS

Furnish septic system plot or draw the proposed construction site with dimensions showing the water well, distances to building and property lines, sewer lines, septic tanks and other sources of contamination. Indicate distance to community water supply, if available. If there is an existing well on the property, indicate status.

FOR OFFICE USE ONLY

Approved by Date FIPS Code Number Year
(Well Permit Number)

INSTRUCTIONS

White Copy and Payment – Health Department (where permit is issued)

Pink Copy – Illinois State Water Survey

Yellow Copy – Retained by Local Health Department

Golden Copy – Water Well Contractor

CHECK THE FOLLOWING BEFORE MAILING:

- Driller - Permit application is mailed to local health department. Refer to the listing of counties provided to you by the Illinois Department of Public Health. If a county is not listed, the application is mailed to the Illinois Department of Public Health.
- Homeowner - Contact the licensed contractor, call your local health department or contact the Illinois Department of Public Health.

The following explanations will assist you in completing the application for a permit to construct or deepen a water well.

Land I.D. # : This includes the PIN number, PC number or any other number used by the county to identify the lot. Contact the local health department to determine if this information is required.

Proposed Use:

- Domestic = Single family home
- Irrigation = Watering, filling a pond or cooling
- Commercial = Apartments, schools, factories, office and other similar buildings
- Livestock = Farm animals
- Other = Anything not listed above

Directions to Site:

Illinois Department of Public Health
 Division of Environmental Health
 525 W Jefferson St.
 Springfield, IL 62761
 217-782-5830

TTY (for the hearing impaired use only) 800-547-0466

IMPORTANT NOTICE

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.