

Iowa Department of Natural Resources

Application for Non-Public Water Well Construction Permit

All wells in Iowa must be constructed by an Iowa DNR Certified Well Contractor or the property owner.

CASHIER'S USE ONLY 0376-542-W300-WC-0597 Applicant's Name DNR Cert No.

A <u>Private</u> Water Well Construction Permit cannot be issued for a well that will provide water for 15 or more service connections or serve 25 or more people per day, 60 or more days per year regardless if the well will be privately or publicly owner.

Examples of facilities that CAN NOT be permitted and constructed by this application are: towns, subdivisions, churches, recreational facilities, business parks, bars, taverns or adult entertainment establishments, food preparation/restaurants, theaters, and day care centers.

Any proposed well owner(s) who seek to have a water supply well constructed for any of the above categories must call the Water Supply Engineering Department of the Iowa Department of Natural Resources for consultation. Please call (515) 725-0282 for more information.

REQUIRED	D INFORMA	TION Note	: Incomplete ap	plications cannot be	processed	and will	be returned.				
Applicant's Name:							Phone Nur	nber:			
Mailing A	nail:										
Mailing Address:						:	Zip:				
	ractors Nan						DNR Cer				
Property (Owner Nam	e:						PWTS	Informatio	า	
Address:							Permit #				
City:							Well #				
Zip:							Permit Issue Date:				
			_					By:			
			Well Con	struction Infor	mation	for <u>Pro</u>	o <u>posed</u> Well		7		
Location by GPS (dd.dddd) Latitude:			Longitude:				COUNTY DEPTH PURPOSE (check uses) 1. household 2. livestock			livostock	
				Ν.		Πw			3. irrigation		commercial
1/4 ,	1⁄4 ,	1/4 ,	Sec.	N, T	R	Ē			5. heat pur		monitoring
911 Address	of well site:		Construction Date:				Gallons per minute needed:				
				<u>Existing</u> Wells	y.		COUNTY	DEPTH	PURPOSE (USE # as above)	IN USE Y or N	Date Built
Location	n by GPS (dd.dd	dd) Latitude:		Longitude:							
				N <i>,</i>		□w					
1⁄4 ,	1⁄4 ,	1⁄4 ,	Sec.	T	R	🗌 E					
Location	n by GPS (dd.dd	dd) Latitude:		Longitude:							
				N,		W					
1⁄4 ,	1⁄4 ,	1⁄4 ,	Sec.	Т	R	E					

CERTIFICATION OF APPLICATION

I Certify that I am not applying for a permit to construct a Public Water Supply well and that all information listed above is correct to the best of my knowledge. I have listed all existing wells. Any well not in use must be sealed as standby wells or properly plugged within 90 days and DNR for 542-1226 filed with the Department of Natural Resources.

Applicant Signature:		Date:								
Submit this Application with a plat map/aerial photo (with location of listed wells clearly marked) and a non-refundable fee										
to:	or	Department of Natural Resources Water Supply Section 6200 Park Ave Ste 200 Des Moines IA 50321	FEE: \$							