

ESSEX BOARD OF HEALTH PRIVATE WELL PERMITTING FORM
(Adopted for use by Board vote on September 23, 1997, revised May 24, 2001 & January 3, 2007)

PROPERTY INFORMATION (to be completed to constitute an official application)

Name of Applicant: _____ Fee: \$ _____

Applicant's Phone: _____ Check # _____

Address where well is to be installed abandoned No. _____ Street _____ Map _____ Lot: _____

Description of Well Location: _____

Author & Date of Septic/Well Plan (if applicable): _____

Method used to substantiate that the proposed well will meet setback requirements from septic systems (100 feet) and streets (25 feet):

Approved Septic Plan Well Plan Site Visit Other: _____

DRILLING PERMIT (to be completed before the well may be drilled)

Name of Driller: _____

Driller's Phone: _____ Driller's Lic. # _____

I hereby certify that I will drill the proposed potable water well at the location or range of locations allowed by the Essex Board of Health and will not vary from that location(s) without prior permission from the Board. I will not drill any well within 50 ft. of a septic tank, 100 ft. of a leach facility or cesspool, or within 25 feet of a public road.

I hereby certify that I will abandon the well according to recommended professional standards in effect at this time.

Driller's Signature *Date*

I have reviewed the well application for the above listed property and have used the above indicated method(s) to determine that the proposed well location meets the required setbacks. On behalf of the Essex Board of Health I hereby authorize the above named driller to drill abandon a well in the location described above (permit not valid until signed by both parties).

Elaine Wozny, C.H.O., Administrator *Date*

WATER SUPPLY/ABANDONMENT CERTIFICATE (to be completed before the well may be used)

The well referenced and permitted on this form was drilled abandoned on _____.

For new installation; the State Well Driller's report, a water quality analysis report, and an as-built sketch* depicting at least two ties to the well from permanent reference points are attached hereto. It has been demonstrated that the referenced well yields water of sufficient quality and sufficient quantity for its intended use and may hereby be placed into operation.

* Check here if as-built location of well will be supplied on septic system as-built plan:

ESSEX BOARD OF HEALTH by:

Lynne Marchetti *Marlene Sanders* *Dr. David Driscoll* *Date*

original: property owner
cc: Water Department, well driller, file