

LASSEN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

1445 PAUL BUNYAN ROAD, SUITE B, SUSANVILLE, CA 96130 ▪ Phone: (530) 251-8528 ▪ Fax: (530) 251-2668

APPLICATION for CONSTRUCTION, REPAIR, MODIFICATION and DESTRUCTION of WELLS

NOTE: THIS IS NOT A PERMIT FOR THE CONSTRUCTION, REPAIR MODIFICATION OR DESTRUCTION OF A WELL. You must go to Lassen County Planning and Building Services at 707 Nevada Street, Susanville, CA 96130, to pay the required fee and obtain your permit.

ASSESSOR'S PARCEL NUMBER	PHYSICAL ADDRESS	PERMIT NUMBER
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To Be Completed By Owner Or Authorized Agent

Permit Expires One (1) Year from Date of Issue

PROPERTY OWNER'S NAME	PROPERTY OWNER'S MAILING ADDRESS	PROPERTY OWNER'S PHONE NUMBER
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WELL DRILLER	CONTRACTOR'S LIC. NUMBER
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WELL DRILLER MAILING ADDRESS	WELL DRILLER PHONE NUMBER
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CONSULTANT FIRM	CONTACT NAME
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CONSULTANT FIRM MAILING ADDRESS	CONSULTANT FIRM PHONE NUMBER
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TYPE OF WORK	USE	EQUIPMENT	WELL DEPTH
<input type="checkbox"/> New Well <input type="checkbox"/> Repair/Modification <input type="checkbox"/> Destruction	<input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Stock <input type="checkbox"/> Industrial <input type="checkbox"/> Public/Community <input type="checkbox"/> Other _____ <input type="checkbox"/> Test Well <input type="checkbox"/> Soil Boring x _____ <input type="checkbox"/> Monitoring x _____	<input type="checkbox"/> Rotary <input type="checkbox"/> Cable Tool <input type="checkbox"/> Other	_____ Proposed _____ Actual

CONSTRUCTION SPECIFICATIONS	PROPOSED SEALING ZONE(S)	SEALING METHOD AND MATERIAL
Casing: <input type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other _____ Diameter _____ Wall/Gauge _____ Borehole Diameter _____ <input type="checkbox"/> Conductor: Diameter _____ Depth _____ Gravel Pack: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pit-less Adapter <input type="checkbox"/> Concrete Pedestal	From _____ To _____ Feet From _____ To _____ Feet From _____ To _____ Feet <p style="text-align: center;">ACTUAL</p> From _____ To _____ Feet From _____ To _____ Feet	Method: <input type="checkbox"/> Pressure/Tremie <input type="checkbox"/> Other _____ Material: <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Cement Grout <input type="checkbox"/> Concrete

PROPOSED PERFORATIONS OF SCREEN	DATE OF WORK	NOTIFICATION REQUIREMENTS
From _____ To _____ Feet From _____ To _____ Feet From _____ To _____ Feet <p style="text-align: center;">ACTUAL</p> From _____ To _____ Feet From _____ To _____ Feet	Start: _____ Completion: _____	The Lassen County Environmental Health Department requires 24 hours notice prior to the sealing of an annual space, filling of the conductor casing, or destruction of a well. A copy of the Well Completion Report (DWR 188) must be submitted to the LCEHD within 30 days of the completion of work.

THIS APPLICATION MUST BE ACCOMPANIED BY A TO SCALE PLOT PLAN FOR 200 FOOT RADIUS FROM WELL. INCLUDING: Easements, Other existing wells, Animal enclosures, Access roads, Drainage, Overhead power, Property lines, Sewage disposal systems, Fuel tanks (above or below ground), Water courses, Springs, Creeks, Rivers, etc., Indicate Northerly direction. (8 1/2 X 11 OR 8 1/2 X 14 WITH APN WRITTEN ON THE PLOT MAP)

I hereby certify that I have prepared this application and that the installation will be done and inspected in accordance with the Lassen County Ordinances and State Laws.

Signed: _____ Title: _____ Date: _____

DO NOT FILL IN BELOW THIS LINE

NOTE: APPROVAL OF THE HEALTH DEPARTMENT IS NOT A GUARANTEE THAT THE PROPOSED INSTALLATION WILL OPERATE SUCCESSFULLY, BUT MERELY THAT THE SYSTEM MEETS THE MINIMUM REQUIREMENTS OF THE HEALTH DEPARTMENT.

APPROVED
 APPROVED WITH CONDITIONS
 BACTERIOLOGICAL SAMPLE REQUIRED

Issued By: _____, E.H.S. Date: _____
 Final Inspection By: _____, _____ Date: _____
 Remarks/Conditions: _____