



WELL CONSTRUCTION APPLICATION

TO BE COMPLETED BY DISTRICT		
District Permit No.:	Date Issued:	Well Registration No.:
Geologic Setting:	Expiration Date:	Driller's Log No.:
TO BE COMPLETED BY OWNER AND DRILLER		
Well Owner:	Property Owner:	Name of Business at Well Site:
Well Owner's Mailing Address:	Property Owner's Mailing Address:	Address of Well Site:
City, State, Zip	City, State, Zip	City, State, Zip
Telephone No. & Contact Name:	Telephone No. & Contact Name:	Telephone No.:
Owner's/Consultant's Well No.:	Assessor's Parcel No. of Well Site:	Book ____ Page ____ Parcel ____
Consultant (Company):	Drilling Company:	
Address:	Address:	
City, State, Zip	City, State, Zip	
Telephone No.:	Telephone No.:	C-57 License No.:
<input type="checkbox"/> Check if address or phone number has changed	<input type="checkbox"/> Check if address or phone number has changed	
THIS SECTION TO BE COMPLETED FOR ALL MONITORING WELLS OR EXTRACTION/RECOVERY WELLS		
Case Name/No.:	Caseworker Name:	
Oversight Agency:	Caseworker Telephone No.:	
Type of Monitoring Device: <input type="checkbox"/> Groundwater <input type="checkbox"/> Vadose	<div style="text-align: right; font-size: small;">(No substitution of signature will be accepted)</div> <hr/> Signature of Responsible Professional <hr/> Print Name <hr/> Civil Engineer Registration No. OR Geologist Registration No.	
Type of Extraction Device: <input type="checkbox"/> Groundwater <input type="checkbox"/> Vadose		
Monitoring Well Use: <input type="checkbox"/> Depth <input type="checkbox"/> Quality <input type="checkbox"/> Chloride		
Nested/Multi-Level Well: <input type="checkbox"/> Yes <input type="checkbox"/> No		
NOTE: If Nested/Multi-Level Well is proposed, a separate permit is needed for each casing.		
Estimated Depth of Completed Well: <input type="checkbox"/> Less than 50 feet <input type="checkbox"/> 50 to 300 feet <input type="checkbox"/> Over 300 feet <input type="checkbox"/> Other: ____		
Purpose of Well: <input type="checkbox"/> Domestic <input type="checkbox"/> Municipal/Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Monitoring <input type="checkbox"/> Cathodic Protection <input type="checkbox"/> Other: ____		
NOTE: Monitoring wells are those constructed for the purpose of obtaining repetitive water level measurements and/or repetitive air samples for analysis.		
Well is to be constructed: <input type="checkbox"/> In a public sidewalk <input type="checkbox"/> In a public road <input type="checkbox"/> On public property <input type="checkbox"/> On private property <input type="checkbox"/> On District property/easement* <input type="checkbox"/> Within 50 feet of the top of a creek bank or District facility		
Within 50 feet of sanitary sewer: <input type="checkbox"/> Yes <input type="checkbox"/> No	Within 50 feet of any existing well: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Within 100 feet of a pit privy, septic tank, or leachfield: <input type="checkbox"/> Yes <input type="checkbox"/> No	Within 150 feet of a cesspool or seepage pit <input type="checkbox"/> Yes <input type="checkbox"/> No	
*See General Condition F, page 2.	Other wells exist on this property? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, status: <input type="checkbox"/> Active <input type="checkbox"/> Inactive <input type="checkbox"/> Abandoned	
SIGNATURES		
I understand and agree that all work associated with this permit is required to be done in accordance with Santa Clara Valley Water District (District) Well Ordinance 90-1, the District Well Standards, and the conditions of this permit (see page 2). I certify that the information given in this permit is correct to the best of my knowledge and that the signature below, whether original, electronic, or photocopied, is authorized and valid, and is affixed with the intent to be enforceable. I also certify that a right of entry/encroachment agreement has been formalized between the well owner and property owner, if parties differ. I also understand that it is my responsibility, as the well owner, to notify the District of any changes in the purpose of this well, from which, is indicated on this application.		
Signature of Property Owner/Agent:	Date:	Print Name of Property Owner/Agent:
Signature of Well Owner/Agent::	Date:	Print Name of Well Owner/Agent:
Signature of Well Driller/Agent:	Date:	Print Name of Driller/Agent:
Signature of Consultant/Agent:	Date:	Print Name of Consultant/Agent:

IMPORTANT: A minimum 24-hour notice must be given to Santa Clara Valley Water District Well Inspection Department prior to installing the annular seal. Call (408) 265-2607, ext. 2660. Please allow 10 working days to process permit application.



WELL CONSTRUCTION APPLICATION

DISTRICT WELL PERMIT NO.: _____

Based on information on this application and attachment(s) hereto (if any) and subject to approval noted below, permission is hereby granted to construct (drill) the described well. Permission to start work may be withheld until a field check verifies all statements made on application by permittee and is also subject to the "General" and "Special" Conditions stated below.

SANTA CLARA COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH APPROVAL (Water Supply Well Only)

NOTE: Department of Environmental Health approval must be granted before this application will be accepted by Santa Clara Valley Water District.

Approved by:

_____, R.E.H.S

- Approved as submitted
- Approved as corrected

Date:

SITE PLAN

A 8½" x 11" paper site plan **must** be attached to this application, including:

1. Location of site features, including major buildings, landscaped areas, tank fields, existing wells, etc.
2. North arrow and scale
3. Location of proposed well with dimensions in feet from well to nearest cross streets.

GENERAL CONDITIONS

- A. **District** (telephone 408-265-2607, ext. 2660) **must be notified a minimum of one working day before construction of the annular seal.** An authorized District representative must be on site to witness the construction of the annular seal. This requirement may be waived by an authorized District representative. If the District waives the inspection requirement, the District may request the permittee(s) to furnish certification, under penalty of perjury, that the well was constructed in accordance with the District Well Standards and with the permit conditions.
- B. Permittee agrees to construct, operate, and maintain the well according to provisions of the latest District Ordinance and the latest published revisions of District Well Standards to the end that this well will not cause pollution or contamination of groundwater or otherwise jeopardize the health, safety, or welfare of the people of the District.
- C. This permit is valid only for the purpose specified herein. Well construction methods authorized under this permit may not be changed except by written approval of an authorized District representative, and only if the District believes that such a change will result in equal or superior compliance with the District and State Well Standards (e.g., if the District representative finds that site conditions warrant such a change).
- D. This permit is only valid for the Assessor's Parcel No. indicated on it.
- E. This permit may be voided if it contains incorrect information. If the permit is voided after work has begun, the well or boring that was constructed under this permit must be destroyed in accordance with District and State Well Standards.
- F. If any work associated with this permit will take place on District property/easement, an encroachment or construction permit must be granted by the District's Community Projects Review Unit (telephone 408-265-2607, ext. 2589).
- G. Before the well constructed under this permit can be used as a drinking water source, its use must be approved by the regulatory agency with authority over such use (typically the Santa Clara County Department of Environmental Health or the State of California Department of Public Health). A completed Well Inventory Form must also be approved.
- H. If the well constructed under this permit cannot be or is not being used for its intended purpose, permittee is hereby required to destroy the well according to the District Well Standards and under permit from the District. Any test holes drilled under this permit must be destroyed within 24 hours of completion of testing activities. Destruction activities must be completed according to District standards. District must be notified a minimum of 24 hours prior to destruction.
- I. Within 30 days of the completion of the well construction activities, the driller or consultant identified on this permit shall fully complete State of California DWR Form 188 and mail the original to the District's Wells and Water Production Unit.
- J. The permittee(s) shall assume entire responsibility for all activities and uses under this permit and shall indemnify, defend, and hold the District, its officers, agents, and employees, free and harmless from any and all expense, cost, and liability in connection with or resulting from the granting or exercise of this permit including, but not limited to, property damage, personal injury, and wrongful death.
- K. Permittees are required to be in full compliance with Cal/OSHA California Labor Code Section 6300.
- L. A current C-57 Water Well Drilling Contractor's License is required for the construction of all wells.
- M. Permittee, permittee's contractors, consultants, or agents shall be responsible to assure that all materials or waters generated during drilling, well construction, well development, pump testing, or other activities associated with this permit will be safely handled, properly managed, and disposed of according to all applicable federal, state, and local statutes regulating such. In no case shall these materials and/or waters be allowed to enter, or potentially enter, on- or off-site storm sewers, dry wells, or waterways. Such materials/waters must not be allowed to move off the property where the work is being completed.
- N. The driller and consultants (if applicable) shall have an active copy of their Worker's Compensation Insurance on file with District.
- O. This permit shall expire if not exercised within 180 calendar days of its approval, unless an extension of the permit expiration date is granted by an authorized District representative.
- P. This permit must be kept on site during all activities associated with it and shall immediately be presented to an authorized District representative upon request.

SPECIAL CONDITIONS

Community Projects Review Unit Approval (if needed):

CPRU Permit No.:

Approved by:

Date:

Please allow 10 working days to process this application.