

City of Plymouth Water Well Drilling Permit Application / Transfer of Ownership

NEW WELL APPLICATION

Permit Number (issued by City):		Issued Date:	
Project Address:		Extension:	
Lot No.:		Subdivision:	
Request for Exemption:	Yes	No	Go to end of application to provide additional information

TRANSFER OF OWNERSHIP WELL APPLICATION

Permit Number (issued by City):		Application Date:	
Project Address:		Approval Date:	
Lot:	Block:	Subdivision:	
Property Owner Name:			
Contact Person/Title:		E-mail:	
Mailing Address:			
Phone Number:	Fax Number:	Cell Number:	

Note: For all "Transfer of Ownership" applications, driller information does not apply. All other information must be provided for consideration of transfer of ownership including "Owner/Applicant Certification" notarization.

Water Well Drilling Permits are valid for the purpose of drilling for up to 180 days from the date of issue and may be renewed by request of the owner/applicant or driller and approval of the Utilities Superintendent once for an additional 180 days. The terms of this application and permit once issued shall remain perpetually binding unless this permit shall expire with work being incomplete, upon which all incomplete work shall be restored to original condition.

Location information to be submitted with the application for proper review should include, but not limited to: a) property boundaries (plat map preferable), b) existing & proposed structures, c) floodplains, d) ponds or other water features, e) water lines, f) sanitary sewers or septic lines-sites-tanks-or field tiles, g) storm sewer lines, h) other possible contaminates, and **l) the proposed well site with distances to all previously features (a-h) noted clearly**.

Driller:	Driller Business Address:	Phone Number:	Drillers License Number:
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Driller need not be specified at time of application for approval of location; however, prior to final issuance of permit, driller information shall be provided and driller shall certify agreement with permit terms. Additionally, driller shall provide detailed water well design specifications and other necessary information sufficient to facilitate review in accordance with City of Plymouth Ordinance No. 2013-2057. Driller shall notify City not less than 24 hours prior to commencement of drilling AND completion of all work under this permit.

OWNER/APPLICANT CERTIFICATION (MUST BE NOTARIZED)

I hereby certify that I have read and examined this application (including attached location information) and know the same to be true and correct, with any misrepresentation or omission being a violation of the City of Plymouth - Code of Ordinances. I further certify that if I am not the owner, I am duly authorized representative of the owner with authority to execute this application and agree with its provisions on behalf of the owner. I certify that all provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I acknowledge that the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating drilling/construction or the performance of drilling/construction. **OWNER/APPLICANT MUST INITIAL EACH BOX BELOW TO BE COMPLIANT**

Inspections of well & related property by the City or it's agents for potential safety threats, cross connections and sanitary sewer use are authorized by owner.	Testing or additional inspection of well at cost to permittee on annual basis may be required by City if contamination, failure, or substandard condition is suspected.
All City water meters at the same property will be required to have an approved backflow prevention device with annual certification provided to the City. **	The use of the well shall be for irrigation and agricultural purposes only, any other use will be cause for disabling of the well with no liability borne by City.
No water may enter City's sanitary sewer system without prior consent, such will be cause for metering/charge or disabling of the well	Upon sale or transfer of the property, these conditions shall be binding as a covenant and restriction on the property; an issued permit will be filed with the County Clerk as such.

** The installation of a backflow device creates a closed system. Without appropriate pressure-relief, thermal expansion could cause: pressure surges, dripping faucets, chronic or continuous dripping of temperature and pressure-relief valves on hot water-heating tanks, and other mechanical problems with hot-water heating tanks, including distortion and rupture. A licensed plumber should be consulted regarding your system prior to installation of a backflow prevention device to assure protection from problems associated with thermal expansion and compliance with adopted City codes.

Signature of Owner/Applicant: _____ **Date:** _____

City of Plymouth Water Well Drilling Permit Application

NOTARIZATION:

STATE OF INDIANA

COUNTY OF: _____

This instrument was acknowledged before me this _____ day of _____

by _____

Personally Known

Produced _____ as identification

{NOTARY SEAL}

Signature of Notary Public

Printed Name - Notary Public, State of Indiana

DRILLER CERTIFICATION (MUST BE NOTARIZED)

I hereby certify that I have read and examined this application (including attached location information) and know the same to be true and correct, with any misrepresentation or omission being a violation of the City of Plymouth - Code of Ordinances. I further certify that if I am a licensed "water well driller/pump installer" in the State of Indiana and comply with all provisions of law and ordinances governing this type of work whether specified herein or not. I acknowledge that the granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating drilling/construction or the performance of drilling/construction. I also certify that I have received a copy of Ordinance No. 2013-2057 of the City of Plymouth, and agree to the provisions and terms herein and therein as they relate to the drilling of water wells.

Signature of Driller: _____

Date: _____

NOTARIZATION:

STATE OF INDIANA

COUNTY OF: _____

This instrument was acknowledged before me this _____ day of _____

by _____

Personally Known

Produced _____ as identification

{NOTARY SEAL}

Signature of Notary Public

Printed Name - Notary Public, State of Indiana

OFFICE USE ONLY:

TOTAL FEES:	\$75.00	Chk#/Cash	Location Info:	Attached / Not Attached
Received by:			Driller Info:	Received / Not Received
Date Received:			Well Specs:	Received / Not Received
NOTES:			Reviewed by:	
			Final Action:	
			Date of Action:	
			Installed Well Inspected:	

Exemption Request

Please state reasons for the exemption request and all supporting documentation:
