

CITY OF PESHTIGO

APPLICATION FOR PRIVATE WELL PERMIT

PROPERTY OWNER: _____

ADDRESS: _____

PHONE NO. _____ APPLICATION FEE: ___\$ 5.00_____

1. Is the property served by public water system? Yes _____ No _____

2. List proposed use of well: _____

3. Report indicating the well produces safe water, as evidenced by at least one sample, must accompany this application.

4. Once every ten years the applicant must have their well/sand point inspected by either a licensed well driller or licensed pump installer to verify the well meets the requirements of Chapter NR 812, Wisconsin Administrative Code. **DNR Form 3300-305: NR 812 Compliance Report must accompany this application.**

Date of last inspection: _____

5. Are there cross connections between the private pump installation and the municipal water system? Yes _____ No _____

DATE: _____

APPLICANT'S SIGNATURE

APPROVED: _____ DENIED: _____

DIRECTOR OF PUBLIC WORKS

DATE: _____

PRIVATE WELL OPERATION PERMIT NO. ISSUED: _____

THIS PERMIT EXPIRES ON: _____

City of Peshtigo
Water Department
331 French Street, Ste. A
Peshtigo, WI 54157
(715) 582-3279

Paid Rec. # _____