



TULARE COUNTY ENVIRONMENTAL HEALTH SERVICES DIVISION

5957 SOUTH MOONEY BLVD. VISALIA, CA 93277
(559)624-7400 – tularecountyehwells@tularecounty.ca.gov

APPLICATION TO CONSTRUCT, DEEPEN, RECONSTRUCT OR DESTROY A WELL

Application #: WWA – _____

Permit #: WELL _____

APPLICANT INFORMATION				
Applicant Name:	_____		Telephone:	_____
I am the:	<input type="radio"/> Property Owner <input type="radio"/> Authorized Agent of the Property Owner <i>(Attach Written Authorization)</i>			
Property Owner: <i>(If Other than Applicant)</i>	_____		Telephone:	_____
Mailing Address:	_____		_____	_____
	Street	City, State	Zip Code	
E-Mail Address:	_____			

LICENSED CONTRACTOR DECLARATION			
Licensed under the provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, as a well drilling contractor and such license is in full force and effect.			
Company Name:	_____		
E-Mail Address:	_____		
Mailing Address:	_____		_____
	Street	City, State	Zip Code
C-57 License #:	_____	Office Telephone:	_____
		Cell:	_____
I would like the Permit to be:	<input type="radio"/> Mailed <input type="radio"/> E-Mailed		
_____ I certify that I have a current and active C-57 Contractor’s License and, if I employ workers, a current certificate of Workers’ Compensation Insurance.			

CONSULTANT INFORMATION <small>(Required for Remedial Action Sites)</small>				
Consulting Firm:	_____		Contact:	_____
Address:	_____		_____	_____
	Street	City, State	Zip Code	
E-Mail Address:	_____		Telephone:	_____

PARCEL INFORMATION			
Location:	_____		
	Address or Distance from Nearest Cross Streets (or Property Lines)		
Is the well within city limits?	<input type="radio"/> Yes <input type="radio"/> No	Nearest City:	_____
		Parcel Size:	_____ Acre(s)
APN:	_____ - _____ - _____	Township	_____
		Range	_____
		Section	_____
GPS Data: <i>(Use Decimal Degrees)</i>	_____	_____	_____
	Latitude	Longitude	Elevation (ft.)
			<input type="radio"/> Valley <i>(Complete the following section)</i>
			<input type="radio"/> Foothills/Mountains
Project Start Date:	_____ <i>Application must be submitted at least ten (10) working days prior to the proposed starting date.</i>		

Groundwater Basin: For wells to be drilled in the Valley, select the Groundwater Basin <u>and</u> the Groundwater Sustainability Agency (GSA) that has jurisdiction where the well will be located.	<input type="radio"/> Kaweah <input type="radio"/> East Kaweah GSA <input type="radio"/> Greater Kaweah GSA <input type="radio"/> Mid-Kaweah Groundwater Subbasin Joint Powers Authority	<input type="radio"/> Kings <input type="radio"/> Central Kings GSA <input type="radio"/> Kings River East GSA	<input type="radio"/> Tulare Lake <input type="radio"/> El Rico GSA <input type="radio"/> Tri County Water Authority	<input type="radio"/> Tule <input type="radio"/> Alpaugh GSA <input type="radio"/> Delano – Earlimart GSA <input type="radio"/> Eastern Tule GSA <input type="radio"/> Lower Tule Irrigation District <input type="radio"/> Pixley Irrigation District <input type="radio"/> Tri County Water Authority
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TYPE OF WORK

New First or Additional Well

Replacement Requires Destruct Permit

Deepening Increase depth of well

Reconstruct Installation of a Casing Liner

Destruct Fill, cap and bury well.

WELL TYPE

Domestic (1 – 4 Connections) **Dairy Supply** **Test Well**

Community (5+ Connections)* **Industrial** **Cathodic Protection**

Agricultural** **Soil Boring(s) †** **Monitoring Well(s) †**

Other _____

†Number of Soil Boring(s) or Monitoring Well(s): _____

INTENDED USE

*For Community (5+ Connection) wells:

Will this well serve a regulated Water System? Yes No If Yes, name of Water System: _____

Name of Water System Contact: _____ Telephone: _____

If No, number of persons to be served by the well: _____ Days per year that water is served: _____ Days

**For Agricultural wells:

APNs to be irrigated by this well: _____ Total acreage: _____

WELL CONSTRUCTION

Drilling Method: Rotary Reverse Rotary Cable Tool Air Rotary Auger

Casing Driven Other _____

Proposed Borehole: Diameter: _____ in. Depth: _____ ft.

Well Casing: PVC Steel Diameter: _____ in. Gauge/Thickness: _____ Slot Size: _____

 Perforations: _____ to _____ ft. _____ to _____ ft. _____ to _____ ft.

Conductor Casing: Yes No Diameter: _____ in. Depth: _____ ft.

Annular Seal: Depth: _____ to _____ ft. _____ to _____ ft. _____ to _____ ft.

 Thickness: 2 in. – All well types except Community 3 in. – Community (5+ Connection) Wells

 Material: Neat Cement _____ Sack Sand Slurry Bentonite Other _____

 Method: Tremie Pipe Free Fall *(Allowed only when the interval to be sealed is dry and less than 30 ft. in depth. Variance required.)*

WELL DEEPENING

Original Well: PVC Steel Diameter: _____ in. Depth: _____ ft. Depth to Water: _____ ft.

Deepened Well: PVC Steel Diameter: _____ in. Gauge/Thickness: _____ Slot Size: _____

 Perforations: _____ to _____ ft. _____ to _____ ft. _____ to _____ ft.

 Proposed Well Depth: _____ ft.

Annular Seal: Depth: _____ to _____ ft. _____ to _____ ft. _____ to _____ ft.

 Material: Neat Cement _____ Sack Sand Slurry Bentonite Other _____

 Method: Tremie Pipe Free Fall *(Allowed only when the interval to be sealed is dry and less than 30 ft. in depth. Variance required.)*

WELL RECONSTRUCTION

Well Reconstruction involves the installation of a casing liner. A Well Permit is required, but there is no well permit fee for a Well Reconstruction Permit; however, a Well Completion Report (WCR) is required to be submitted within thirty (30) days of work being completed. Use the space below to describe the Well Reconstruction work to be done.

WELL DESTRUCTION

Well Casing: PVC Steel Diameter: _____ in. Excavation Depth: *(Max 5')* _____ ft. *(No excavation requires variance.)*

Original Well Depth: _____ ft. Distance from Property Lines: _____

Seal: Depth: _____ ft. Method: Free Fall *(Min 20'; Max 30')* Tremie Pipe *(Only metal tremie pipe can be used for destructions.)*

 Material: Neat Cement _____ Sack Sand Slurry Bentonite Other _____

WELL SETBACKS

Setbacks from surrounding properties must be taken into consideration when selecting a well site location. Setback requirements may be increased by Tulare County if dangers of pollution, contamination or other adverse conditions are known to be present. If the well site is within a one mile radius of a landfill, there may be additional requirements. Should a site visit be needed to verify the proposed well location, mark all well sites with a surveyor’s stake labeled “Well Site”. Measuring in feet, list distances from proposed well drilling location. Minimum requirements in parentheses.

Front Property Line (25 ft.)	_____	Storm Drain (50 ft.)	_____
Side Property Lines (5 ft.)	_____	Seepage Pit (150 ft.)	_____
Septic Tank & Leach Field (100 ft.)	_____	Animal/Fowl Enclosure (100 ft.)	_____
Sewer Laterals (50 ft.)	_____	Existing Active Well(s) (50 ft.)	_____
Surface Water (25 ft.)	_____	Underground Storage Tank (150 ft.)	_____
Transmission Lines	_____		

CONTRACTOR DISCLAIMERS

All information provided in this application is subject to review by the Groundwater Sustainability Agency (GSA) in which the proposed well is to be located, prior to permit issuance. Additional conditions may apply based upon GSA review. GSAs may attach well permit conditions including, but not limited to, depth limitations, perforation limitations and additional setback requirements on wells to be Constructed or Deepened within their jurisdictions. Submitting an incomplete application will delay the issuance of a permit. Drilling operations shall not commence until this application is approved and a permit has been issued. Once issued, the permit is to be available at all times on-site during Construction, Deepening or Reconstruction activities. Drilling fluids shall be disposed of in a safe and sanitary manner, and shall not be permitted to flow, or be diverted, onto adjacent properties. With my initials, I certify that I have read and understand the above disclaimers: _____

APPLICANT DISCLAIMERS

Issuance of a well permit does not guarantee future usage of the proposed well depending upon GSA requirements. Actual operation of the proposed well must be consistent with the ordinances, regulations and other policies active within a GSAs jurisdiction. Prior to operation of the well, there may be requirements to undertake additional action(s) so as to comply with these policies. Improper operation of the proposed well may result in fines and/or civil penalties. With my initials, I certify that I have read and understand the above disclaimers: _____

DRILLING CONTRACTOR CERTIFICATION STATEMENT

_____ I hereby certify under penalty of perjury that all information provided on this well permit application is true, correct and complete to the best of my knowledge. I understand that all work is to be done in accordance with the Tulare County Well Ordinance and the California Department of Water Resources Bulletin 74-81, 74-90 and all subsequent bulletins, as well as any and all permit conditions added through the application review process.

CONTRACTOR

This application is not considered complete until properly signed by both the Contractor and the Property Owner (or the Authorized Agent of the Property Owner). Any misrepresentation on this application or noncompliance with required permit conditions, or regulations, will result in the issuance of a “Stop Work Order”.

Print Name: _____
Signature: _____
Date: _____

APPLICANT

This application is not considered complete until properly signed by both the Contractor and the Property Owner (or Authorized Agent of the Property Owner). As the Property Owner (or Authorized Agent of the Property Owner) I hereby grant permission to perform the work as described in this application. Also, I agree to provide access to TCEHD personnel for inspection purposes.

Print Name: _____
Signature: _____
Date: _____

By signing above, I hereby agree to defend, indemnify, and hold harmless the County of Tulare, its agents, legislative body, officers or employees in any legal or administrative action, claim or proceeding concerning approval of this Application; or at the County's election and in the alternative, shall relinquish such approval. I agree to assume the defense of the County in any such legal or administrative action, claim or proceeding with legal counsel paid for in the entirety by me, but subject to the County's reasonable approvals. I agree to reimburse the County, its agents, its legislative body, officers or employees for any judgments, amounts paid in the settlements, court costs, and attorney's fees with the County, its agents, legislative body, officers or employees may be required to pay at court as a result of such action, claim or proceeding. The County may, at its sole discretion, participate at its own expense in the defense of any such action, claim or proceeding, but such participation shall not relieve me of my obligations under this condition.

ENVIRONMENTAL HEALTH SERVICES DIVISION USE ONLY

Date Received _____ Fee Amount _____ Receipt # _____ Invoice # _____

Payment Method: Cash Check # _____ CC Approval # _____ Received by: _____

Flood Zone Landfill DWR DTSC Parcel Manager Hold CEQA RMA Clear Date _____

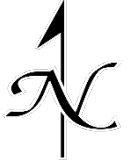
GIS Review PALMS CSLB Check C-57 Expiration Date _____ GSA Review Send Date: _____

Other _____

SITE MAP

The space below can be used to include a map. All maps must include:

- Nearest cross-streets to the parcel
- Existing and proposed structures on the parcel
- Setbacks documented above
- Surface water (ponds, lakes, streams and canals) within 300 ft.
- Property lines and dimensions
- Any existing well(s) and septic systems on the parcel and any neighboring parcel(s)



Driving directions to well site: _____

TO BE COMPLETED FOR WELL CONSTRUCTION
(For Domestic, Community, Agricultural, Dairy or Industrial Wells Only)

Property Owner/Contact Person Name _____ **Telephone** _____

1. What type of well is being drilled?
 - Domestic** Serves 1 to 4 Service Connections/Homes.
 - Community** Serves a Residential Area with Five (5) or more Services Connections/Homes, a Business, or a Public Building.
 - Agricultural** Exclusively used to supply water for irrigation or other agricultural purposes.
 - Dairy** Exclusively used by a Dairy Farm for the milk production process.
 - Industrial** Exclusively used by a Business for the processes related to producing goods or services.

2. How many homes will the new well serve? _____ 2a. Service Connections? _____
3. How many employees work at your business? _____ 3a. Overall water users? _____
4. How many wells are currently on this parcel? _____
Domestic _____ **Community** _____ **Agricultural** _____ **Dairy** _____ **Industrial** _____
5. Are there any **inactive** or **abandoned** wells on this parcel? **Yes** **No**
 (An **inactive** well is not routinely used but capable of being made operational with minimal effort. An **abandoned** well is a well that has not been used for at least one (1) year, or is in such disrepair that it can no longer produce water.)
6. What is the expected usage of the new well? **Year-Round** **Seasonal**
7. Are there any animal or fowl enclosures on this parcel? **Yes** **No**
 If Yes, how far is the enclosure from the proposed well site? _____ **ft.** **(May require site visit to verify.)**
8. What is the reason for drilling a new well?
 - Current well went dry.** How long has the well been dry? _____
 - Current well about to go dry.**
 - Additional well due to lack of production from existing source(s).**
 - First well on parcel.**
 - Other** _____
9. What is/are the plan(s) for the existing well(s) once the new well(s) is/are drilled?
 - Keep the existing well(s) active. (Keep the pump(s) installed and connected to power.)**
 - Destroy the existing well(s) using a licensed C-57 well contractor.**
 - File an Inactivation Permit. (Requires an annual permit fee.)**
 - I don't know. (Please call Environmental Health at (559)624-7400 for more details.)**
10. Has the recent drought influenced your decision to drill a new well? **Yes** **No**