

Application for Private Water

Construction Permit

as authorized by

The Iowa Department of Natural Resources and Mills County.

Note: Incomplete applications cannot be processed and will be returned.

All wells in Mills County must be constructed by a Certified Well Contractor.

APPLICANT INFORMATION

Applicant Name: _____

Mailing Address: _____ City: _____

State: _____ Zip: _____ Phone Number: _____

Name of Property Owner: _____

Well Drilling Company: _____

Well Contractor's Name: _____ Certification No. 40 _____

****FOR NEW CONSTRUCTION YOU MUST APPLY FOR 911 ADDRESS WITH THE COUNTY ENGINEER'S OFFICE BEFORE YOUR WELL PERMIT CAN BE PROCESSED.**

PERMIT NUMBER

County # _____

Date Permit Issued: _____

By: _____

WELL CONSTRUCTION INFORMATION OF PROPOSED WELL

E911 # _____ (Flagging of proposed well location is required.)

_____ 1/4, _____ 1/4, _____ 1/4, SEC: _____, T _____ N, R _____ W

Anticipated Construction Date: _____

Anticipated Depth: _____

Purpose: 1. Household 2. Livestock 3. Irrigation 4. Commercial 5. Heat Pump 6. Monitoring

WELL CONSTRUCTION INFORMATION EXISTING WELLS

List all existing wells on owner's contiguous property

_____ 1/4, _____ 1/4, _____ 1/4, SEC: _____, T _____ N, R _____ W Depth _____, Purpose _____, In Use _____

_____ 1/4, _____ 1/4, _____ 1/4, SEC: _____, T _____ N, R _____ W Depth _____, Purpose _____, In Use _____

_____ 1/4, _____ 1/4, _____ 1/4, SEC: _____, T _____ N, R _____ W Depth _____, Purpose _____, In Use _____

Purpose: 1. Household 2. Livestock 3. Irrigation 4. Commercial 5. Heat Pump 6. Monitoring

CERTIFICATION OF APPLICATION

I certify that the above is correct to the best of my knowledge. I will provide any additional information requested. I have listed all existing wells. Any well not in use must be sealed as standby wells or properly plugged within 90 days and DNR form 542-1226 filed with the Department of Natural Resources.

Applicant Signature: _____ **Date:** _____

Submit this Application with a scale drawing of the locations for all wells along with a non-refundable fee of **\$250.00** to **Mills County Public Health**

Application Checklist: This form completed - _____ \$250 application fee - _____ Location map - _____