A r Well Permit **City of Nekoosa**

Property Owner: _____ Phone No. _____

Property Address: _____

Well Information:

1. Is property served by Municipal Water System? Yes____ No_____
2. Has Well Construction Report (Form 3300-77A) been filed with the Department of Natural Resources? Yes (Attach copy) _____ No _____ If no, complete the following:
   a. Date Well Constructed _____Well drilling contractor _____
   b. Construction type _____
   c. Well diameter _____ Well depth_____
3. List proposed use of well:
   _____
   _____
4. Attach a statement or report from a certified well driller or pump installer stating the well has been inspected and complies with Wisconsin Adm. Code NR 812.42

I certify that the above information is accurate to the best of my knowledge:

_____ _____

Applicant Signature Date

Water Utility Report:

1. Well location and installation complies with Chapter NR 812.42 of Wisconsin Adm. Code Yes____ No_____
   a. If no, explain:_____
2. Bacteriological water sample
   a. Date taken:_____ Results:_____
3. Inspection verifies that no cross connection exists between the Municipal Water System and the Private Well? Yes_____ No_____

_____ _____

Rick Schmidt, P.E. Date
Director of Public Works