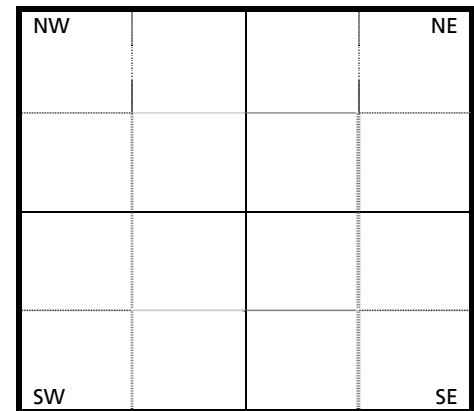


### Application for Construction of Non-Public Water Well

Property Owner   Telephone   Present Mailing Address					
Applicant (if other)   Telephone   Present Mailing Address					
Proposed Kansas-Licensed Water Well Contractor   Telephone   Mailing Address					
Section-Township-Range	Acres	Subdivision if applicable	Lot	Block	Tract if applicable

<input type="checkbox"/> Drilled well <input type="checkbox"/> Driven well <input type="checkbox"/> Other	Address if known
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<input type="checkbox"/> Existing residence <input type="checkbox"/> New residence <input type="checkbox"/> Future residence ("open field") <input type="checkbox"/> Irrigation well <input type="checkbox"/> <b>Legal description</b> and <input type="checkbox"/> <b>site diagram</b> of building site are attached. Proposed well must meet minimum separation distances as applicable: <input type="checkbox"/> 150' to chemical storage <input type="checkbox"/> 100' to feedlot <input type="checkbox"/> 150' to fertilizer storage <input type="checkbox"/> 100' to manure storage <input type="checkbox"/> 150' to liquid fuel storage <input type="checkbox"/> 50' to building  <input type="checkbox"/> 150' to pesticide storage <input type="checkbox"/> 50' to septic tank <input type="checkbox"/> 150' to landfill <input type="checkbox"/> 50' to pressure sewer line <input type="checkbox"/> 100' to inactive well <input type="checkbox"/> 50' to orangeburg or clay tile sewer line  <input type="checkbox"/> 100' to septic disposal field <input type="checkbox"/> 50' to stream, pond, lake <input type="checkbox"/> 100' to sewage lagoon <input type="checkbox"/> 50' to areas of surface runoff accumulation <input type="checkbox"/> 100' to pit privy <input type="checkbox"/> 25' to property line  <input type="checkbox"/> 100' to abandoned cesspool <input type="checkbox"/> 15' to buried utility lines <input type="checkbox"/> 100' to barnyard <input type="checkbox"/> 10' to PVC or cast iron sewer line
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Well location in square-mile section

**I assume responsibility** for ensuring that this non-public water well is installed according to the approved plan and in conformity with Chapter 4 of the Douglas County Sanitary Code: "Water Supplies."  
 **I understand** that the location of the water well shall not be moved from the specific area designated without prior approval from the Health Department. Unauthorized relocation may be cause for (1) revocation of permit, (2) suspension of permit, or (3) denial of final approval of the water well.  
 **I certify** that no easements are located upon the land designated for construction of the water well.  
 **I understand** that the issuance of this permit shall not be construed or interpreted as imposing upon the Lawrence-Douglas County Health Department or its employees any warranty that this water well will function properly.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_  Owner     Agent

#### For Health Department Use Only

Comments:	911	S-T-R
Approved by _____	Date _____	Permit Number _____

