

Siskiyou County Community Development-Environmental Health Division

806 South Main Street, Yreka, CA 96097 – Telephone 530-841-2100 FAX 530-841-4076

**Water Well Permit**

T \_\_\_\_\_ R \_\_\_\_\_ S \_\_\_\_\_  
Permit # \_\_\_\_\_

**Applicant** (Must be licensed contractor or property owner and must be legible.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

| Well Type          | Annual Seal Depth   |
|--------------------|---------------------|
| Domestic .....     | 20 foot minimum     |
| Industrial.....    | 50 foot minimum     |
| Agricultural ..... | 20 foot minimum     |
| Public .....       | 50 foot minimum     |
| Monitoring .....   | as approved # _____ |
| Deepening.....     | n/a                 |
| Destruction .....  | n/a                 |
| Soil Bores.....    | as approved # _____ |
| Other .....        | as approved         |

**Minimum thickness of annular space seal is 2 inches**

**A PLOT PLAN MUST** be submitted on an 8.5"x11" sheet of paper. It must include all property boundaries, waterways, roads, septic systems and structures, location of the proposed well in relationship to the property boundaries.

**Permit Conditions**

- Well driller must provide a minimum of 24 hours' notice prior to installing or placing annular seal.
- All wells must be drilled under a C-57 license.
- Applicant/well driller is responsible for maintaining all setbacks as approved by on location map below including a minimum of 100 feet from any established on-site sewage disposal location.
- Owner and well contractor are required to submit a completed well log within 20 days of well completion.
- This permit does not guarantee issuance of any other development permits or land use requests for this property.
- This permit expires one year from the date of issuance.

**Signature of Owner: (required on all applications)**

I am the owner of the property and certify that the information contained herein is accurate. I understand that this application will become a permit upon review and approval by the Environmental Division. I understand that well construction may not begin prior to receiving a permit and all terms and conditions apply. I hereby authorized SISKIYOU County to enter the property for inspection purposes. I hereby authorize the contractor herein to obtain the permit.

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

**Signature of Contractor (required on all applications)**

I certify that I possess a valid C-57 contractor's license that is in full force and effect. I certify that I have read this application and the above information is correct. I agree to comply with all Siskiyou County Ordinances and State Laws relating this well construction. I understand that well construction may not begin prior to receiving a permit and all terms and conditions apply.

Contractor \_\_\_\_\_ Date \_\_\_\_\_

**Property Location**

Property Owner: \_\_\_\_\_

Assessor's Parcel #: \_\_\_\_\_

Location: \_\_\_\_\_

Parcel Size: \_\_\_\_\_

**Well Contractor**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

License #: \_\_\_\_\_

**Fees**

Well Permit.....\$360

Well Deepening.....\$185

Well Destruction.....\$185

Monitoring Well(s) and Soil Bores (First 3).....\$360

And \$75 for each additional well

**For Official Use Only**

|   | Date | Initial |
|---|------|---------|
| Property Owner Verification: _____  |      |         |
| Set Back Requirements: _____  |      |         |
| Flood: _____  |      |         |
| City Public Works: _____  |      |         |
| Received by: _____ Date: _____  |      |         |
| Fee Received: _____   |      |         |
| Permission is hereby granted for the above well work in accordance with all State and County laws and standards as provided in Siskiyou County Code, Title 5, Chapter 8 and any conditions as set forth in this permit. |      |         |
| Issued by _____ Date: _____   |      |         |
| Seal Inspection: _____ Date: _____  |      |         |
| Seal Depth: _____   |      |         |
| Final Inspection by: _____ Date: _____  |      |         |
| Inspection Notes: _____   |      |         |
| Date Well Log Received: _____ Log #: _____  |      |         |

**Location Map – (completed by department)**