

Town of Highland
Building Department
2 Proctor Road
Eldred, New York 12732
Tel. (845) 557-8203 Fax (845) 557-0257

APPLICATION FOR WELL PERMIT

Permit No. W-_____

OWNER: _____

ADDRESS: _____

LOCATION OF WELL: Attach Plot Plan/or Survey _____

TAX MAP: Section: _____ Block _____ Lot _____

CASING: _____

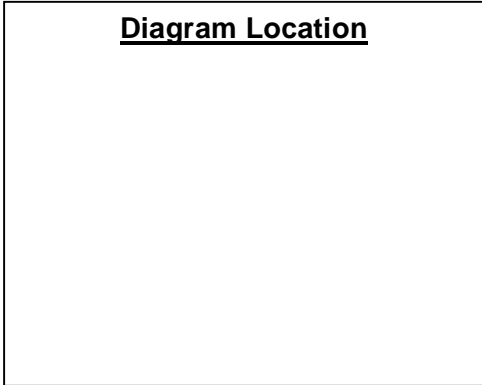
FIRST WATER: _____

GALLONS PER MINUTE _____

DEPTH OF WELL _____

STATIC WATER LEVEL _____

SUGGESTED DEPTH FOR PUMP _____



COPY OF WATER TEST (CO will not be issued without it)

COMMENTS: _____ Copy from Well driller of the NYSDEC Water Well log – Required for CO

DRILLER'S NAME : _____ Phone _____

ADDRESS: _____

Well Driller hereby confirms all data is correct _____

Signature of Well Driller

NO CERTIFICATE OF OCCUPANCY WILL BE ISSUED WITHOUT THE RETURN OF THIS DOCUMENT FILLED OUT WITH ACCURATE DATA

I, as applicant, am familiar with all the Municipal, Building, Dwelling Laws and Codes and Ordinances enforced in the Town of Highland, New York and hereby agree that the project proposed on this application will conform with such; WELL PUMP wiring shall be installed in accordance with the National Electric Code. Installers shall have their wiring inspected by approved Electric Inspector.

_____ Date

_____ Applicant or Agent

_____ Date

_____ Code Enforcement Officer