

**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. \_\_\_\_\_

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LOCATION OF WELL: Attach Plot Plan/or Survey \_\_\_\_\_

TAX MAP: Section: \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

CASING: \_\_\_\_\_

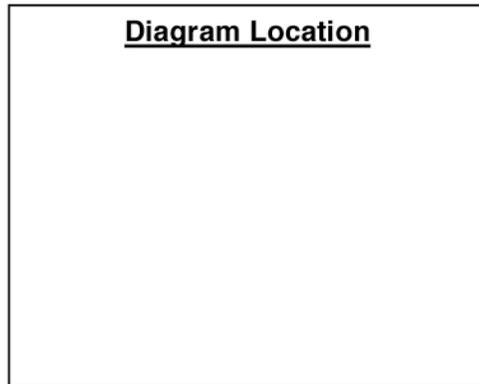
FIRST WATER: \_\_\_\_\_

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