TOWN OF RIDGEFIELD

Health Department

Well Permit # _____

Tax Assessor's # _____

Application For Permit to Drill a Well

Address _____ Lot # _____

Type of permit: New Replacement Abandonment Deepen Existing Hydrofrac

Are there public water supply or community water supply lines within 200 ft. of the property? Yes No

Well Driller _____ Phone _____

Address _____
Street Town State Zip

Registration # _____

Are there any neighboring septics within 75 ft. of the well to be drilled? Yes No

Signature of Well Driller _____ Date _____

Issuance of this permit is based upon the information submitted. Falsification, by misrepresentation or omission, or failure to comply with the conditions of approval of this permit shall void the permit.

66 Prospect Street, Ridgefield, Connecticut 06877 (203) 431-2745

www.ridgefieldct.org