



Application for Private Water Well Construction Permit

FOR OFFICE USE ONLY:
☐ Copy to DNR

NOTE: Incomplete applications cannot be processed and will be returned!
All wells in Iowa must be constructed by a Certified Well Contractor or the property owner.

SITE ADDRESS _____ PARCEL # _____

APPLICANT INFORMATION

Applicant Name: _____
Mailing Address: _____ City: _____
State: _____ Zip: _____ Phone Number: (____) _____
Name of Property Owner: _____ Phone: _____
Well Contractor's Name: _____ Certification No.: _____

EMERGENCY PERMIT CERTIFICATION

Name of County: _____
Signature of County Agent: _____

PERMIT NUMBER

DATE Permit Issued: _____
By: _____

JO. CO. PERMIT

PWTS # _____

Well Construction Information of Proposed Well

WELL #	LOCATION	COUNTY	DEPTH	PURPOSE (circle uses)
____ 1/4, ____ 1/4, ____ 1/4, Sec ____ T ____ N, R ____ W				1.household, 2.livestock, 3.irrigation, 4.commercial 5.heat pump, 6.monitoring
Latitude: _____ Longitude: _____				
Est. Construction Date: _____				

Well Construction Information of Existing Wells

List all existing wells on owner's contiguous property:

LOCATION	COUNTY	DEPTH	PURPOSE	IN USE Y or N	Date Built
____ 1/4, ____ 1/4, ____ 1/4, Sec ____ T ____ N, R ____ W\E					
____ 1/4, ____ 1/4, ____ 1/4, Sec ____ T ____ N, R ____ W\E					
____ 1/4, ____ 1/4, ____ 1/4, Sec ____ T ____ N, R ____ W\E					

CERTIFICATION OF APPLICATION

I Certify that the above is correct to the best of my knowledge. I will provide any additional information requested. I have listed all existing wells. Any well not in use must be sealed as standby wells or properly plugged within 90 days and DNR form 542-1226 filed with the Department of Natural Resources.

Applicant Signature: _____ Date: _____

Proposed Wells intended to serve 15 or more service connections or serve 25 or more people per day at least 60 days per year whether publicly or privately owned cannot be issued a Private Water Well Construction Permit. The owner(s) must apply for a public water well construction permit from the Department of Natural Resources.

Submit this Application with a plat map/aerial photo (with location of listed wells clearly marked) and a non-refundable fee

to: **Johnson County Public Health**
855 S. Dubuque Street Ste. 113
Iowa City, IA 52240

County fee:
\$230.00

How would you like to receive your permit?

☐ Mail ☐ Fax _____ ☐ Email _____