



Town Of Pelham

Board of Health

### Well Permit Application

Name of Property Owner(s) \_\_\_\_\_

Location of Property \_\_\_\_\_, Pelham, MA

[Mailing Address if different \_\_\_\_\_]

Telephone (h) \_\_\_\_\_, (w) \_\_\_\_\_, (cell) \_\_\_\_\_

Is there a septic system located on the property? Y N (If yes, please note on plot plan submitted.)

**Well information:**

Purpose of well  Irrigation  Monitoring Well\*  Potable  
(\*if not being overseen by the Department of Environmental Protection)

Well Drillers Name \_\_\_\_\_

Well Driller's Co. Name/Address \_\_\_\_\_

Well Driller's Telephone No. ( ) \_\_\_\_\_ Driller's Name/MA License No. \_\_\_\_\_

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**Please check off the following requirements, with the agreement that each is done:**

Please attach a stamped plot plan showing the location of the proposed well in relation to the home, barn or other structures, septic system, underground storage tanks (USTs), roadway, drains, wetlands, and sewer lines. Scale 1 inch = 40 feet (NOTE: An informal plan is NOT acceptable for a new well.)

It is designated on your plan where the water line is located leading from the well to whatever connection is being made. You must note all other existing utilities in the area of the well and along the path of the water line, including the electric and/or control cable that leads from the well.

Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Applicant \_\_\_\_\_ Print Name \_\_\_\_\_