



Polk County Public Works
 5885 NE 14th Street
 Des Moines, IA 50313
 (515) 286-3376

APPLICATION FOR WELL PERMIT

PERMIT #20 _____ -- _____

*****NO PERMIT SHALL BE ISSUED UNTIL SUCH TIME THE PROPOSED WELL SITE HAS BEEN PROPERLY FLAGGED AND APPROVED BY POLK COUNTY ENVIRONMENTAL HEALTH. IT IS A VIOLATION OF THE IAC DIVISION 567, CHAPTER 49 AND CHAPTER II OF THE POLK COUNTY HEALTH REGULATIONS TO COMMENCE DRILLING WITHOUT A VALID PERMIT.*** INCOMPLETE APPLICATIONS WILL BE RETURNED.**

PLEASE PRINT

JOB SITE ADDRESS: _____ TOWNSHIP: _____

OWNER: _____ PHONE: (_____) _____ - _____

ADDRESS: _____ CELL: (_____) _____ - _____

CITY: _____ STATE: _____ ZIP CODE: _____

WELL DRILLER: _____ PHONE: (_____) _____ - _____

COMPANY: _____ CELL: (_____) _____ - _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

LEGAL DESCRIPTION:

District/Parcel: _____ - _____ - _____	Twنشp: _____	Sec: _____	Range: _____

Well Type:	<input type="checkbox"/> Driven	<input type="checkbox"/> Drilled	<input type="checkbox"/> Bored	Diameter	Depth Est.
HEAT PUMP INFO		OTHER TYPE WELL INFORMATION			
# Holes:	Bore Hole Depth:	Construction Material:	Type of Pump:		
# Loops:	Loop Diameter:				
Loop Length:					
Loop Pipe Manufacturer:					
Structures Served:					

****WATER ANALYSIS WILL NOT BE TAKEN AND OCCUPANCY OF THE PREMISES WILL NOT BE APPROVED WITHOUT PRIOR SUBMITTAL OF A WELL DRILLER'S LOG. A WATER ANALYSIS AND DRILLER'S LOG MUST BE SUBMITTED PRIOR TO FINAL INSPECTION. ALL PARTS OF THE SYSTEM MUST BE ACCESSIBLE FOR THE FINAL INSPECTION.****

All permits issued by the Polk County Environmental Health Division EXPIRE and become void ONE CALENDAR YEAR FROM DATE OF ISSUANCE.

The information contained heron shall be legally deemed as part of the related Well Permit Application.

I HAVE REVIEWED AND UNDERSTAND THE AFOREMENTIONED REQUIREMENTS. ALL INFORMATION SUPPLIED BY ME IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

MAKE CHECKS PAYABLE TO POLK COUNTY.

 Printed Name of Applicant or Owner

 Signature of Applicant or Owner

Date _____

PERMIT FEE: \$175.00 CHECK #: _____ CASH: _____ RECEIPT #: _____ INITIALS: _____