

Borough of Watchung

BOARD OF HEALTH



Permit # _____

NEW WELL WATER SUPPLY APPLICATION

APPLICATION FEE: \$100.00

WELL TEST (REQUIRED): \$50.00

TOTAL DUE: \$150.00

(CHECK PAYABLE TO BOROUGH OF WATCHUNG)

Construct a New Well [] Alteration [] Location []

Address: _____ Block: _____ Lot: _____

Owner: _____

Address: _____

Well Driller: _____

Name: _____

Address: _____

NJSDEPE License No. _____

Expiration Date: _____

Depth of Well: _____

Pump Capacity: _____

Depth of Casing: _____

Purpose of Well: _____

Draw a sketch indicating the proximity distances from the nearest building, sewer, septic tank, D-Box, Disposal field, seepage pit, dry well or cesspool (See table 2, 7:10-12.13) (or attach the state permit with the drawing of well location)