



Health and Human Services Agency  
Environmental Health, Hazardous Materials

860 N Bush Street, Ukiah, CA, 95482 707-234-6625

## MONITORING WELL APPLICATION

To Construct, Destroy, Repair, or Alter: Monitoring Wells, Cathodic Wells,  
Remediation Wells or Borings

(For Official Use Only)

# PERMIT

Application is hereby made to the Mendocino County Division of Environmental Health for a permit to perform the work as indicated below at the following site location:

Site Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

APN: \_\_\_\_\_ Anticipated Drill Date: \_\_\_\_\_

**MS4 Zone:** Yes  
No

**Work Information:** Indicate below the total number of wells already **existing** on the site:

Domestic Water Wells \_\_\_\_\_ Monitoring Wells \_\_\_\_\_

**Type of Work Proposed:** Construction \_\_\_\_\_ Destruction \_\_\_\_\_  
Repair \_\_\_\_\_ Alteration/Conversion \_\_\_\_\_

Indicate below the total number of **proposed** wells or borings for each type listed:

Monitoring Wells \_\_\_\_\_ Cathodic Wells \_\_\_\_\_ Borings/hydropunches \_\_\_\_\_

### Consultant and Contractor Information:

**Consulting Firm:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Driller/Contractor:** \_\_\_\_\_

C-57 License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Permit Terms and Conditions** provide that the contractor will:

- Secure the authorization of the property owner.
- Submit written authorization(s) from the off-site property owner(s) for all off-site work.
- Complete the Site Plot Sketch according to the instructions on the back of this application.
- Consult with the inspector for an available inspection date a minimum of 5 days prior to scheduling field activities.
- Schedule field work to commence after a permit has been issued.
- Place seals by "free fall" (without a tremie pipe) only in dry intervals of less than 30 feet BGS.
- Construct surface seal/cover to prevent physical damage, unauthorized access, & contamination.
- Submit a State of California Well Completion Report/Log or an "As Constructed" Well Log, or a Destruction Log of the Soil Boring within 15 days of completion as a requirement for final approval [Mendocino County Code Section 16.04.060 (c)]. **(Final approval will not be given without the log(s) or sketch.)**

Date Paid: \_\_\_\_\_

Fee Paid \$ \_\_\_\_\_

Payment # \_\_\_\_\_

Number: \_\_\_\_\_

Rec'd By: \_\_\_\_\_

### Permit Agreement:

I hereby agree to construct, destroy, repair or alter all wells or borings on this permit application in accordance with the "Permit Terms And Conditions" as stated above and in compliance with the Mendocino County Well Ordinance (County Code Chapter 16.04) and the California Well Standards Bulletin 74-81 & 74-90 as they are amended from time to time.

I understand that this permit expires one year from the date of issuance (Mendocino County Code Section 16.04.090).

**For Known Contaminated Sites:** I understand that the **North Coast Regional Water Quality Control Board** requires an approved **Work Plan** prior to the start of any field work under this permit. [Please call (707) 576-2220 for questions regarding work plan approval.]

**For Sites within the Coastal Zone:** I understand that the Department of Planning and Building requires a Coastal Zone Permit prior to the start of any field work under this permit, and that they may require additional permit fees.

(Print Name)

(Signature)

Date: \_\_\_\_\_

### Coastal Zone Approval:

(Signature)

Date: \_\_\_\_\_

### Permit Approval:

This application is deemed as approved and issued when signed and dated by a Mendocino County Health Officer in the space provided on the lines below:

**Issued by:** \_\_\_\_\_

(Health Officer's Signature)

Date

Work completed satisfactorily:

**Final Approval by:** \_\_\_\_\_

(Health Officer's Signature)

Date:

Date Boring and Well Logs were received: \_\_\_\_\_

Distribution: Original to EH  
Copy to well driller

Copy to Consultant  
Copy to Water Quality Control

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## This image shows a full page of graph paper. It features a uniform grid of small squares created by thin, dashed black lines. The grid covers the entire area of the page, providing a template for drawing or writing. There are no margins, text, or other markings present.

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