

Mendocino County Health and Human Services Agency

"Healthy People, Healthy Communities" Stacey Cryer • HHSA Director



Community Health Services Environmental Health Division

UKIAH OFFICE 860 N Bush St Ukiah CA 95482 Phone: 707-234-6625 Fax: 707-463-4038

FORT BRAGG OFFICE 120 W Fir St Fort Bragg CA 95437 Phone: 707-961-2714 Fax: 707-961-2720

DATE: INSPECTOR: ADDRESS:

TO:

COASTAL WATER DISTRICTS

Albion Mutual Water Company, FAX: 937-3687 Caspar South Service Co, PO Box 774 Mendocino CA 95460 City of Fort Bragg Water Dept, FAX: 961-2802 Elk County Water District, FAX: 877-1833 Irish Beach Water District, FAX: 877-1833 North Gualala Water Company, FAX: 884-1620 Pacific Reefs Water District, FAX: 1-925-684-0457 Point Arena Water Works, FAX: 882-3258 Surfwood Mutual Water Corp, FAX: 202-0228 Westport County water District, FAX: 961-1665

INI AND WATER DISTRICTS

Brooktrails Community Services District, FAX: 459-0358 Calpella County Water District, FAX: 462-2687 City of Ukiah Utilities, Water & Sewer Division, FAX: 463-6740 City of Willits Water Dept, FAX: 459-7104 Hopland Public Utilities District, FAX: 744-1979 Laytonville County Water District, FAX: 984-6084 Millview County Water District, FAX: 462-8327 Pine Mountain Mutual Water, 3800 Chinquapin Dr, Willits 95490 Redwood Valley County Water District, FAX: 485-5148 River States Mutual (Russian River Estate area) FAX: 462-2689 Rogina Water Company, call before FAXing: 462-5279 Willow Water District, FAX: 462-2689

An Application for a Permit to construct a water well has been filed with our office. A copy of that application is service area.

Please respond to the following and return to our Fort Bragg/Ukiah office, so that we can proceed with our review of the application and possible issuance of a permit. Thank you.

(To be completed by Water District representative):

The proposed well is on a parcel that is not in our service area

Private wells are not allowed in our service area

Private wells are allowed in our service area and we acknowledge that we have been notified (by this form) of a possible private water source that may require the installation of a back flow prevention device (Note: The district, not DEH, is responsible for the inspection of all back flow prevention devices)

Required Conditions, if any (please attach if additional space is needed):

Authorized Signature: Water District Name: Printed Name: Date:

Please FAX or mail this form to our Fort Bragg / Ukiah office. Thank you.