



CITY OF POOLER

INSPECTION DEPARTMENT

OFFICE USE ONLY:

Approved to issue by: _____ Date application received in ofc: _____
 Date Paid : _____ PERMIT NUMBER : _____
 FINANCE RECEIPT NO : _____ Date permit issued and mailed : _____

1. P.I.N. (Property Identification Number) _____
2. On Lot number _____ Tract or Subdivision _____
3. Situated on the _____ side of _____ Street / Road / Avenue
4. Between _____ Road / Street / Avenue and _____ Street/Road/Avenue
5. Property mailing address _____
6. Deep Well _____ Shallow Well _____
7. Estimated depth in feet _____ Method of Construction _____
8. The specific purpose of which such well is to be used _____
9. The number of gallons of water per minute such well will be capable of pumping _____
10. The anticipated amount of water to be used per day in the operation of such well _____
11. Desired yield _____ Proposed diameter of well in inches _____
12. Type of well casing proposed _____
13. Depth of casing _____ Motor horse power _____
14. Number of dwelling units / structures served by the proposed well _____
15. Tank size _____
16. Distance of the proposed well site from:
 - (a) Nearest septic tank or drainfield _____
 - (b) Property line _____
17. The nearest distance from the well owners property to the nearest county / city/ community water supply line is _____ feet.

I / We the undersigned have truthfully, to the best of our knowledge, completed the above application for a CITY OF POOLER Well Permit. I / We understand that the issuance of a Well Permit in no way constitutes a right to violate any CITY OF POOLER Ordinance. I / We also attest to the fact that the well owner has read and completed the attached 2nd part (if a deep well) of this application submitted.

18. Owners Name _____ Contractor / Agent Signature _____
19. Owners Address _____ PRINT CONTRACTOR / AGENT NAME _____
20. Home Phone / Work Phone _____ Contractors Address _____
21. Date _____ Contractors Phone Number _____
 _____ Date Application Submitted _____