

OFFICE USE:

Flood Plain

Well Permit # _____ Fee: \$ _____ District: No _____ YES _____ If Yes: FF or FW

Received By: _____ Date: _____ APPROVALS: WATER: _____ DATE: _____

Total Fees: \$ _____ Receipt # _____ Check # _____ Cash: _____

Issued By: _____ Date: _____ Zoning: _____

Applicant or Authorized Representative	Name: _____			Phone: _____		
	Street: _____			Fax: _____		
	City: _____	State: _____	Zip Code: _____	Email Address: _____		
Property Owner	Name: _____			Same As Applicant? Yes / No		Phone: _____
	Street: _____			Fax: _____		
	City: _____	State: _____	Zip Code: _____	Email Address: _____		
Location	Address of Construction: _____				Township: _____	County: DeKalb
	Lot: _____	Subdivision: _____			Section: _____	
Type of Well	Residential Heating		Commercial	Industrial	Irrigation	
Well Drilling Contractor	Name: _____				Phone: _____	
	Start Date: _____				Completion Date: _____	

Sketch Detailing Location:



- A. Show Boundaries and Buildings
- B. Show Sanitary Sewer, Storm Sewer and All Other Drainage
- C. Show to Scale from Reference Pointes on Proposed Drilling Location Drawings

I, the owner or authorized applicant by the owner of record, agree that any well requested by this application will comply with, and conform to, all applicable laws of the State of Indiana and the Water Ordinance of Auburn Indiana. The information provided in this application is to the best of my knowledge and accurate. All work done in a public right-of-way, utility or drainage easement, floodplain, or on property other than that described in this Application only with written authorization approved by the City of Auburn Water Department.

 Signature of Applicant or Authorized Representative

 Printed Name

 Date