

VILLAGE OF GRANTSBURG

316 SOUTH BRAD STREET
GRANTSBURG, WISCONSIN 54840



PHONE: 715-463-2405
FAX: 715-463-5555

EMAIL: publicworks@grantsburgwi.com

APPLICATION FOR 5 YEAR PRIVATE WELL PERMIT

Property Owner _____ Phone # _____

Property Address _____

Well Information:

1. Is property served by public water system? Yes _____ No _____

2. Has a well construction report been filed with the Department of Natural Resources (attach copy)? Yes _____ No _____

If no, complete the following:

a. Date well constructed _____

b. Well drilling contractor _____

c. Construction type _____

d. Well diameter _____ Well depth _____

3. List proposed use of well _____

4. Attach a statement or report from a certified well driller or pump installer stating that the well has been inspected and is in compliance with Wis. Adm. Code NR 812.

5. Attach copies from the certified lab with the well sample results.

I certify that the above information is accurate to the best of my knowledge:

Applicants Signature _____ Date _____

Application Fee _____ Date Paid _____

Visit us on the web at www.grantsburgwi.com

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Water Superintendents Report:

1. Well location and installation complies with Chapter NR 812 of the Wisconsin Adm. Code?

See www.legis.state.wi.us/rsb/code/nr/nr812.pdf for more information.

Yes _____ No _____

If no, explain

2. Bacteriological water sample No 1: Date taken _____ Results _____

Bacteriological water sample No 2: Date taken _____ Results _____

3. Inspection verifies that no cross connection exists between the public water system and the private well? Yes _____ No _____

Water Superintendents Signature _____ Date _____