



Well Permit Application

Page 1 of 2

Updated JUNE 2023

OFFICE USE ONLY

Date Received: _____ Date Paid: _____ Permit Number: _____

Approved by: _____ Finance Receipt: _____ Date Issued/Mailed: _____

Proposed Well Information

PIN _____ Lot Number _____ Tract/Subdivision _____
Situated on the: North South East West side of _____ (Street name)
between _____ (Street name) and _____ (Street name)

Property Mailing Address _____

Deep Well/Shallow Well _____ Estimated Depth in Feet _____ Construction Method _____
Specific Purpose _____ GPM Capability _____ Estimated Use Per Day _____
Desired Yield _____ Proposed Diameter Inches _____
Proposed Casing Type _____ Casing Depth _____ Motor Horsepower Day _____
Number of Units/Structures Served _____ Tank Size _____
Well Site Distance from Nearest Tank or Drainfield _____ Distance from Property Line _____
Distance from Well Owner's Property Line to Nearest City/County/Community Water Supply Line in Feet _____
Well Site Distance from Nearest Tank or Drainfield _____ From Property Line _____



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Page 2 of 2

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Owner Name

Owner Phone

Owner Address

Owner Email

Contractor Name

Contractor Phone

Contractor Address

Contractor Email

Affidavit

I/we the undersigned have truthfully, to the best of my knowledge, have 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 second section (if deep well) of this application.

Applicant/Agent Name

Applicant/Agent Signature

Date