Porter Township HC 12 Box 461 Dingmans Ferry, PA 18328

Permit	#:	

APPLICATION FOR WELL PERMIT

PROPERTY OWNER:				
NAME:				
ADDRESS:				
	Zip:			
PHONE:	(
LOCATION OF PROPERTY:				
TAX MAP ID #:				
DATE OF APPLICATION:				
APPLICANT SIGNATURE:				
SITE PLAN: (ATTACH SEPARATE DRAWING TO APPLICATION - SEE SAMPLE) REQUIRED INFORMATION DETAILED DRAWING OF LOT WITH LOCATION OF WELL, ALL STRUCTURES AND SEPTIC SYSTEM. INCLUDE ALL DISTANCES FROM SEPTIC SYSTEM, STRUCTURES AND LOT LINES. NOTE: IF PROPOSED WELL LOCATION IS LESS THAN 100' TO PROPERTY LINE SEPTIC SYSTEM ON ADJACENT PROPERTY MUST BE LOCATED TO VERIFY 100' SETBACK REQUIREMENT WELL DRILLER: NAME: ADDRESS:				
	Zip:			
PHONE:	()			
TOWNSHIP APPROVING AUTHORITY:				
APPROVED BY:	New York			
SIGNATURE:				
DATE APPROVED:				
FEE PAID:				
CHECK #:				