

\$60 Fee Paid: _____
 Permit Number _____
 Issue Date _____
 Block, Lot, Map # _____
 If Map 15 Or 16, Unit # _____

*Application must be accompanied with required \$60 fee.
 Check made be made payable to "Town of Sheffield".*

Town of Sheffield Board of Health

Town Hall, 21 Depot Square, 2nd Floor; PO Box 325, Sheffield, MA 01257-0325
 413-229-7000 Ext 157 Fax: 413-229-7010 Email: boh@sheffieldma.gov

Application for Well Construction Permit

Please submit 4 weeks prior to construction with a copy of the well driller's Massachusetts License.

Name of Applicant / Owner: _____ Phone #: _____

Full Address: _____

Proposed well address: _____

Block, lot & Map # _____ Check one: ___ New Building ___ Existing Building

Name of Engineer/Sanitarian: _____ License #: _____

Address: _____

Phone #: _____ Fax #: _____

Name of Well Driller: _____ License #: _____

Address: _____

Phone #: _____ Fax #: _____

Please Check: ___ Residential Usage ___ Commercial Usage* ___ Agricultural Usage*

Electrical work will be performed by a licensed electrician.

This application must be accompanied by a map of the proposed well location map must include a scaled, extended plot plan produced by a registered engineer or sanitarian. A plan submitted according to Title 5 requirements for septic systems will be accepted with this application. (Please include estimated draw of all wells on the property: _____ gallons/day.*)** All items listed below must be indicated on submitted plans:

(A) Required minimum lateral distances between Well and possible sources of contamination: **(fill in all blanks)**

| Potential Source of Contamination | <u>DEEP WELL</u> | | <u>SHALLOW WELL</u> | |
|-------------------------------------|------------------|-----------------|---------------------|-----------------|
| | Required Minimum | Actual Distance | Required Minimum | Actual Distance |
| Subsurface sewage disposal field | 100 feet | _____ | 150 feet | _____ |
| Cesspool or seepage pit | 150 feet | _____ | 150 feet | _____ |
| Septic Tank | 50 feet | _____ | 100 feet | _____ |
| Sewer Lines | 50 feet | _____ | 50 feet | _____ |
| Property Lines | 30 feet | _____ | 30 feet | _____ |
| Public way | 25 feet | _____ | 50 feet | _____ |
| Driveways | 20 feet | _____ | 20 feet | _____ |
| Stables, pastures, feedlots, manure | 150 feet | _____ | 150 feet | _____ |
| Underground Fuel Storage Tanks | 200 feet | _____ | 200 feet | _____ |

(B) The Existence of Any of the Following Within 200 Feet of Proposed Well:

Existing and proposed structures: _____

Public Water Supply, Subsurface water and subsurface drainage courses: _____

Any other recognizable sources of pollution, including roads: _____

I agree to provide a Well Completion Report completed by the well driller within 30 days of completion of the well.

Signed: _____ (Applicant/Owner) Date: _____