



Sierra Valley Groundwater Management District

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Application for construction, repair, modification and destruction of wells

ASSESSORS' PARCEL NUMBER	PHYSICAL ADDRESS	
GPS COORDINATES		
WELL APPLICANT	COUNTY	TYPE OF WORK
<i>Name, Mailing Address, Phone Number</i>	PLUMAS <input type="checkbox"/> SIERRA <input type="checkbox"/>	NEW WELL <input type="checkbox"/> REPAIR or MODIFICATION <input type="checkbox"/> DESTRUCTION <input type="checkbox"/>
PROPOSED GALLONS PER MINUTE	PROPOSED CASING	USE
0 – 25 GPM <input type="checkbox"/> 26 – 99 GPM <input type="checkbox"/> 100+ GPM <input type="checkbox"/>	SIZE OF OUTSIDE DIAMETER: _____	DOMESTIC <input type="checkbox"/> TEST WELL <input type="checkbox"/> COMMUNITY <input type="checkbox"/> LIVESTOCK <input type="checkbox"/> AGRICULTURE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER _____
WELL DRILLER <i>Name, Address, Phone Number and License Number</i>		

NOTE: APPROVAL OF THE SVGMD IS NOT A GUARANTEE THAT THE PROPOSED INSTALLATION WILL OPERATE SUCCESSFULLY, BUT MERELY THAT THE SYSTEM MEETS THE MINIMUM REQUIREMENTS OF THE SVGMD.

APPROVED **APPROVED WITH CONDITIONS** **DENIED**

Approval/Denial by: _____ Date: _____

Remarks/Conditions: _____
