

**PUBLIC HEALTH SEATTLE AND KING COUNTY
PUBLIC WELL SOURCE SITE APPLICATION**

Record ID SR Department Use Only
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Provide the information requested on this form and *submit 3 copies* of this application along with current Drinking Water fee.
(<http://www.kingcounty.gov/healthservices/health/ehs/fees.aspx>)

Please check the type of inspection requested.

_____ **Group “A” Well**

_____ **Group “B” Well**

SECTION A: PROPERTY INFORMATION

If there is no address, give an approximate address based on the neighbor’s property.

Address of property: _____
Street City Zip

Parcel Number of property on which well is located: _____

Legal Description of property: Section _____ Township _____ Range _____

SECTION B: OWNERSHIP INFORMATION

Owner's name: _____

Address: _____
Street City Zip

Phone : _____ (Home) _____ (Work) _____ (email)

Designer/ Engineer Submitting Request (if different than owner):

Name: _____

Address: _____
Street City Zip

Phone: _____ Email _____

SECTION C: GROUP “A” WELL (Must be submitted by on-site sewage system designer of professional engineer) Application to include the following:

- Critical Area Review (from the applicable jurisdictional authority)
- Water Letter of Availability from water service District.
- Scaled Site Plan (Maximum paper size 11”x 17”); include 100-foot and 600-foot radius
- Route Map
- Cleared and marked trail to the flagged well site.
- Draft of Well Water Covenant(s)
 - (<http://www.kingcounty.gov/healthservices/health/ehs/water/facts.aspx>)

SECTION D: GROUP “B” WELL (Must be submitted by on-site sewage system designer of professional engineer) Application to include the following:

- Critical Area Review (from the applicable jurisdictional authority)
 - **Water Letter of Availability from water service District.**
 - Copy of On-site sewage system record drawing
 - If record drawing is not available, a reconciled record drawing may be required to verify that required setback to well can be met.
 - Scaled Site Plan (Maximum paper size 11”x 17”) to include;
 - 100-foot protective well radius
 - Location of existing well
 - Location of all structures, septic system and components and all other sources of contamination.
 - Route Map
 - Cleared and marked trail to the flagged well site.
 - Draft of Well Water Covenant(s)
 - (<http://www.kingcounty.gov/healthservices/health/ehs/water/facts.aspx>)
- **IF THE SITE HAS TO BE REINSPECED DUE TO LACK OF INFORMATION OR INACCURATE DIRECTIONS TO THE SITE, ANOTHER WELL SITE INSPECTION FEE WILL BE REQUIRED.****

MINIMUM 100 FOOT SETBACK DISTANCE FROM THE PROPOSED WELL TO:

Building sewer - (house plumbing stub-out and tightline) Septic tank - (cesspool, outhouse, etc.) Sewer Pressure effluent pipes Sewage drainfield lines Building sewers Reserve drainfield areas Railroad tracks & public power utilities or gas lines Animal enclosures - (e.g. barns, chicken coops, pig pens, rabbit hutches, dog kennels) Manure and/or garbage piles House & garage foundation Chemical storage areas - (insecticides, herbicides, paint products, fuel products, etc.) Surface water Public and private road easements Underground storage tanks Sanitary and abandoned land fills (1000 feet)
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FOR HEALTH DEPARTMENT USE ONLY:

REVIEWED (date): _____ **BY:** _____

Comments: _____

