



# St. Joseph County Health Department

*"Promoting physical and mental health and facilitating the prevention of disease, injury, and disability for all St. Joseph County residents"*

## DRAWING REQUIREMENTS For Water Supply Well Application

Permit Number: \_\_\_\_\_

Address: \_\_\_\_\_

In the space below or on a separate sheet, provide a drawing that shows and labels the locations of the following features and the distance of each feature to the proposed well location:

1. The building to be served by the well and its dimensions.
2. The owner's septic system including the tank and distribution lines.
3. The septic system of the neighboring properties.
4. The nearest property line.
5. Any fuel storage tank on the property or neighboring property.
6. Any surface water body on the property or neighboring property.
7. Location of any pre-existing well to be abandoned.

**Note:** The drawing must be prepared by a well driller, engineer, professional geologist, registered soil scientist, or architect.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_