



GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES



DEPARTMENT OF PLANNING AND NATURAL RESOURCES

DIVISION OF ENVIRONMENTAL PROTECTION

45 MARS HILL

FREDERIKSTED, ST. CROIX, VI 00840

PHONE: (340) 773-1082, FAX: (340) 773-9310

APPLICATION FOR PERMIT TO DRILL WELL

In compliance with Title 12, Chapter 5, Virgin Islands Code, the undersigned

Name of Driller & License Number

Mailing Address

Telephone Number

Hereby applies for a permit to:

- Drill a well
Deepen an existing well
Clean and refurbish an existing well

On the property:

(Name of Property Owner)

(Estate, Lot Number and Island)

(Property Tax Number)

The well will be drilled to the approximate depth of ___ feet and will be ___ inches in diameter. It will have ___ feet of casing, constructed of ___ material, ___ feet of screening of ___ (description of screen) and will have ___ (proposed type of casing seal).

Purpose of well

Well Driller responsibilities':

1. Provide an he attached property map from Cadastral Survey shows the following:
 - a) Location of proposed well relative to existing buildings or other physical features.
 - b) Location of existing wells on the property or nearby adjacent properties.
 - c) Location of all known sources of contamination in the vicinity.

2.The pump and the meter will be installed by well driller, provide the following information:

Capacity of Pump _____ Horsepower _____ Size _____
(GPM) (HP) (Inches)

3. A log showing the various strata or formations intersected by the well, formation yields and quality, and casing and screening details will be forwarded to the Division of Environmental Protection within 30 days after completion of drilling operations.

Fee of \$10.00 is attached. (If check, please make payable to the Government of the Virgin Islands).

Signature of Property Owner

Date

Signature of Well Driller

Driller's License No