



**APPLICATION FOR RENEWAL OF
 WELL DRILLER, PUMP INSTALLER
 LICENSE**

PLEASE COMPLETE EACH SECTION IN FULL
 A SEPARATE FORM MUST BE SUBMITTED FOR EACH LICENSE RENEWAL
 PLEASE PRINT OR TYPE

LICENSE TYPE (CIRCLE ONE)		LICENSE NUMBER				
WD	PI					

1. APPLICANT: _____
2. HOME MAILING ADDRESS: _____
 _____ HOME PHONE #: _____
3. NAME OF COMPANY: _____ WC/PC LIC # _____
4. COMPANY MAILING ADDRESS: _____

5. COMPANY TELEPHONE NUMBER: _____ FAX: _____
6. HAS ANY OF THE ABOVE INFORMATION CHANGED DURING THE LAST YEAR? Yes _____ NO _____
7. THIS APPLICATION MUST BE ACCOMPANIED BY:
 - A. THE APPROPRIATE LICENSE FEE **AND**
 - B. DOCUMENTATION OF CONTINUING EDUCATION CREDITS RECEIVED DURING THE YEAR (WD 4, PI 2)

**CHECKS ARE TO BE MADE PAYABLE TO: DIVISION OF WATER RESOURCES
 RENEWAL FEES:**

WELL DRILLER \$30 PUMP INSTALLER \$15

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

 SIGNATURE OF APPLICANT

 DATE

REVISED October 20, 2010