



Minneapolis Health Department
Environmental Programs Division
 250 South 4th Street, Room 510
 Minneapolis, MN 55415-1316
 (612) 673-3000 Fax (612) 673-2635
EnvironmentalHealthPermit@minneapolismn.gov
SEND PAYMENTS ONLY BY MAIL OR FAX

WELL CONSTRUCTION APPLICATION

LEGAL DESCRIPTION OF WELL LOCATION: Attach a site map with well location(s), property lines, structures, roads and landmarks.

| TOWNSHIP | RANGE | SEC. | SMALL | QUARTERS | LARGE | WELL HEAD FINISH | | DEPTH (FT) | UWN |
|----------|-------|------|-------|----------|-------|-----------------------------------|--------------------------------------|------------|-----|
| N | W | | 1/4 | 1/4 | 1/4 | <input type="checkbox"/> AT GRADE | <input type="checkbox"/> ABOVE GRADE | | |
| N | W | | 1/4 | 1/4 | 1/4 | <input type="checkbox"/> AT GRADE | <input type="checkbox"/> ABOVE GRADE | | |
| N | W | | 1/4 | 1/4 | 1/4 | <input type="checkbox"/> AT GRADE | <input type="checkbox"/> ABOVE GRADE | | |
| N | W | | 1/4 | 1/4 | 1/4 | <input type="checkbox"/> AT GRADE | <input type="checkbox"/> ABOVE GRADE | | |

| | | |
|--------------|-----------|--------------|
| WELL ADDRESS | SITE NAME | SITE ADDRESS |
|--------------|-----------|--------------|

- AT-GRADE WELLS submit:** Explanation why the well casing cannot terminate 12 inches above grade, and a cross-sectional diagram of the well cap and vault or manhole.
- Construction through a CONFINING LAYER, multi-cased or multi-aquifer wells submit construction plan that includes:** well diameter, grout material, drilling method, grouting method, casing materials, cross-sectional diagram of the well, and cross-section of anticipated geology.
- For wells constructed in a well construction advisory area approval must be obtained also from MDH.**
- Yes** **No** **Is a variance required?** The Minnesota Department of Health must approve all variance requests.
- Yes** **No** **Is the well to be constructed in the Minneapolis right-of-way?** An encroachment permit needs to be obtained prior to issuance of a City Permit. For an encroachment permit contact Minneapolis Public Works Engineering Design, Right-of-Way Department at 612-673-2403.

TYPE OF WELL TO BE CONSTRUCTED:

Environmental Well as defined in Minnesota Statute 1031.005 Subdivision 8a.
 Industrial AC Irrigation Residential NTNCPWS TNCWS Other:

WELL OWNER:

| | | | |
|----------------|---------|---------------------|----------|
| WELL OWNER | ADDRESS | STATE | ZIP CODE |
| CONTACT PERSON | CITY | PHONE NUMBER - - | |

ENVIRONMENTAL OR ENGINEERING CONSULTANT:

| | | |
|----------------|--------------|---------------------|
| CONTACT PERSON | COMPANY NAME | PHONE NUMBER - - |
|----------------|--------------|---------------------|

PROPERTY OWNER: (if different)

| | | | |
|----------------|---------|---------------------|----------|
| PROPERTY OWNER | ADDRESS | STATE | ZIP CODE |
| CONTACT PERSON | CITY | PHONE NUMBER - - | |

If the well owner is not the property owner, Minnesota Statutes, Chapter 1031.205, Subdivision 8, requires that, "A person may not construct or have constructed a well for the person's own use on the property of another until the owner of the property on which the well is to be located and the intended well user sign a written agreement that identifies which party will be responsible for obtaining all permits or filing notification, paying applicable fees and for sealing the well. If the property owner refuses to sign the agreement, the intended well users may, in lieu of a written agreement, state in writing to the Commissioner that the well user will be responsible for obtaining permits, filing notification, pay applicable fees, and sealing the well. Nothing in this subdivision eliminates the responsibilities of the property owner under this chapter, or allows a person to construct a well on the property of another without consent of other legal authority."

A signed agreement must be included with if the property owner and intended well user are not the same person or company.

| | | |
|--------------------------------------|------------------|---------------------------|
| PROPERTY OWNER SIGNATURE (OR AGENT): | DATE: (M/D/YYYY) | RELATIONSHIP TO PROPERTY: |
|--------------------------------------|------------------|---------------------------|

WELL CONTRACTOR INFORMATION:

| | | | |
|----------------|---------|---------------------|----------|
| COMPANY OWNER | ADDRESS | STATE | ZIP CODE |
| CONTACT PERSON | CITY | PHONE NUMBER - - | |

I understand that all information provided in this permit application is true and complete. I understand that misstatements of facts may result in forfeiture of all rights to licensure/registration as a well contractor/monitoring well contractor in accordance with Minnesota Statutes, Chapter 1031.

| | | | |
|---|--|------------------|-------------------------|
| PRINT LICENSED OR REGISTERED CONTRACTOR NAME: | LICENSED OR REGISTERED CONTRACTOR SIGNATURE: | DATE: (M/D/YYYY) | COMPANY LICENSE NUMBER: |
|---|--|------------------|-------------------------|

PENALTIES: Failure to obtain a permit prior to constructing a well is a violation of Minnesota Statutes, Chapter 1031, Minnesota Rules Chapter 4725, and City of Minneapolis Ordinances Chapters 48 and 216.

Contact Minneapolis Environmental Services prior to beginning work on-site.

Send my permit by: Pickup Mail Fax to: - - Email to:

Payment must be received with notification. MAKE PAYMENTS ONLY BY MAIL OR FAX. NO CASH.

Construction Application Fee is \$253.60 per well sealing record. Total cost: \$_____

Make checks payable to "Minneapolis Finance Department" or charge to: VISA AMEX MC EXP: _____

Cardholder: _____ Card #: _____ DO NOT EMAIL CREDIT CARD INFORMATION CODE: