

APPLICATION FOR WELL PERMIT
RUSCOMBMANOR TOWNSHIP, BERKS COUNTY

Name, Address and Phone Number of property owner:

NAME: _____ PHONE NO: _____

ADDRESS: _____

Name, Address and Phone Number of driller:

NAME: _____ PHONE NO: _____

ADDRESS: _____

Type of well proposed (e.g. residential, commercial, monitoring):

Location of property (street address):

Attach a dimensioned plot plan showing the exact location of the well.

Inspections will be made to: 1) verify the well location prior to drilling,
2) verify proper location after installation.

For further information call (610) 987-9290 (LTL Consultants Ltd.)

I understand that the Ruscombmanor Township Well Ordinance requires a 50 foot minimum isolation distance from a well to any property line.

Applicant: _____ **Date:** _____

Title: _____