



TOWN OF CAPE CHARLES
APPLICATION FOR SHALLOW WELL PERMIT

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

1. A permit is hereby requested to install \_\_\_\_\_ Shallow Well(s) at the following address:

Street address: \_\_\_\_\_ Lot #: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Tax Map/Parcel # or Deed Book/Page #: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_ Owners' Phone #: \_\_\_\_\_

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

2. This section needs to be filled in if the Property Owner is not performing the work himself:

Well Contractor's Name: \_\_\_\_\_ Contractor's Phone #: \_\_\_\_\_

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

Contractor's License No.: \_\_\_\_\_ Classification (A, B, or C): \_\_\_\_\_ Contract Value: \$ \_\_\_\_\_

Contractor [\_\_\_\_ has / \_\_\_\_ does not have] State's specialty designation ("WWP") to drill wells.

The well(s) will be used for:  Non-Potable Water  Irrigation  Other (Explain) \_\_\_\_\_

3. Materials that must accompany this Application:

- a. Va. Dept. of Health Private Well Construction Permit
b. Application Fee: \$100/Well X \_\_\_\_\_ Wells = Total Due \$ \_\_\_\_\_

WARNING!

- A. All well construction or abandonment activities must be reported to this office on a Commonwealth of Virginia Uniform Completion Report and accompanied by a signed well drillers log (GW2) for this project. This information is required before the Town's final approval of the well can be given and a "Certificate of Operation" issued.
B. No shallow well shall be connected to a potable water supply.
C. The shallow well permit is void if applicant: (i) does not comply fully with the Town's ordinance and regulations (available in this office) as well as with all applicable state and federal laws and regulations, (ii) if the information supplied by the owner/contractor in this or any other document regarding this project is not accurate, or (iii) if the well is found to be deeper than 50 feet (50').

I have read and understand the Town's ordinance and regulations regarding Shallow Wells, as well as those promulgated by the Commonwealth of Virginia. I understand that well construction must be completed, and the required Certificate of Completion submitted to the Town, within 6 months after issuance of the permit. The Property Owner acknowledges that if the Town requires this well to be closed for any reason, in addition to and without limiting the Town's other rights and remedies, the Property Owner ultimately is responsible to the Town for all costs of closing the well. If the Applicant is not the Property Owner, by signing below, the Applicant represents and warrants that he is authorized to execute this application on behalf of the Property Owner.

Signature of Property Owner or his agent: \_\_\_\_\_

Applicant's printed name: \_\_\_\_\_

Applicant's mailing address: \_\_\_\_\_

Approved by Public Utilities: \_\_\_\_\_ Approved by Code Official: \_\_\_\_\_

**TOWN OF CAPE CHARLES  
SHALLOW WELL CONSTRUCTION PERMIT  
CONTRACTOR'S/OWNER'S CERTIFICATE OF COMPLETION**

**INSTRUCTIONS:     FILL IN ITEMS 1 AND 4.  ALSO, FILL IN EITHER 2 OR 3.**

**1. Address of Subject Property:**

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

Owner's Name: \_\_\_\_\_

Well Permit No.: \_\_\_\_\_                      Issue Date: \_\_\_\_\_

**2. Contractor's Certification: (If a licensed contractor was used, the contractor MUST FILL IN AND SIGN THIS SECTION.)**

The undersigned contractor certifies that the undersigned: (i) is duly-licensed by the Commonwealth of Virginia as a Class \_\_\_\_\_ contractor, (ii) is authorized under such license to drill the well(s) covered by the applicable Town well permit, (iii) [\_\_\_\_ has / \_\_\_\_ does not have] state specialty designation ("WWP") to drill wells, (iv) completed construction of the applicable shallow well(s) on the subject property to a depth that does not exceed fifty feet (50'), and (v) has attached a true copy of the well-driller's log for this project. The undersigned understands that, in addition to and without limiting the Town's other rights and remedies, the undersigned will be responsible for all costs of closing the well if the Town determines that the depth of the well exceeds 50' or if the undersigned has not otherwise met the Town's or state's laws and regulations.

Name of Contractor: \_\_\_\_\_

By: \_\_\_\_\_

Signatory's Name and Title: \_\_\_\_\_

Contractor's License No.: \_\_\_\_\_

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

Phone: \_\_\_\_\_

**3. Owner's Certification: (To be filled in and signed by Owner ONLY IF a licensed contractor did NOT perform the work.)**

I certify that I am a lawful owner of the subject property and that, as of \_\_\_\_\_, 20\_\_\_\_, I have completed construction of the applicable shallow well(s) on the property to a depth that does not exceed fifty feet (50'). I understand that, in addition to and without limiting the Town's other rights and remedies, I will be responsible for all costs of closing the well if the Town determines that the depth of the well exceeds 50' or if I have not otherwise met the Town's or state's laws and regulations.

Signature of Property Owner: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

**4. Notary:**

COMMONWEALTH OF VIRGINIA  
COUNTY OF NORTHAMPTON

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public