

Township of Williams  
655 Cider Press Road  
Easton, Pennsylvania 18042  
Phone: (610) 258-6788  
Fax: (610) 258-6080

Application Date: \_\_\_\_\_  
Well Permit Number: \_\_\_\_\_

**WELL PERMIT APPLICATION**  
*Williams Township Well Ordinance No. 2019-01*

Name of Property Owner: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address of Property and Well Location: \_\_\_\_\_

Tax Map ID: \_\_\_\_\_

Well Driller: \_\_\_\_\_ PA License Number: \_\_\_\_\_

Well Driller Address: \_\_\_\_\_

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

Williams Township Well Class (according to Ordinance No. 2019-01 Section 4-36):

Class I

Class II

Class III

Type of Well Construction:

- New Well
- Deepen Existing Well
- Hydrofracturing
- Abandoned
- Monitoring Well
- Other: \_\_\_\_\_

Well Use:

- Residential Drinking Water
- Irrigation
- Agriculture
- Geothermal
- Injections/Extraction
- Monitoring
- Testing

Geothermal Wells:

- Open Loop
- Closed Loop
- \_\_\_ # of holes
- Monitoring wells  
\_\_\_ # of holes

Drilling Method:

- Hydraulic Rotary
- Bored/Augured
- Other: \_\_\_\_\_

Method of Sewage Disposal:

- Public
- On-Site (Provide Permit Number and Date Issued Below)

Permit Number: \_\_\_\_\_

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

Licensed Well Driller description of Well Construction per Ordinance No. 2019-01 Section 8:

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Sequence of Well Drilling Activities:

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Note: Four (4) copies of plot plan must accompany this application and be a minimum scale of 1"=50' on 8 1/2" by 11" paper minimum. The Applicant by signing below acknowledges that the information on this application and accompanying plot plan is accurate to the best of their knowledge.

Note: An application fee of \$\_\_\_\_\_ is required. Payment must be made at time of application.

Note: This permit will expire 1 year from the date of issuance.

Note: A Williams Township professional service agreement and escrow fee is required per the township amended fee ordinance.

Applicant's Name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

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

Approved By: \_\_\_\_\_  
Building Official/Zoning Officer

Check Number: \_\_\_\_\_

Permit Issue Date: \_\_\_\_\_

Well Completion Report Received on: \_\_\_\_\_