GREENE TOWNSHIP, FRANKLIN COUNTY
PERMIT FOR WELL CONSTRUCTION

Date: _____ Application #: _____

Permit No : _____ Permitee: _____

Date Issued: _____ Address: _____

Fee: _____ City: _____

State: _____ Zip Code: _____

Phone No.: _____ _____
Day *Evening*

Work to Begin On: _____

Work Completed On: _____

_____

Address of Property Where Well will be constructed

_____ _____
Well Driller Name *PA Certification No*

_____
Address

_____ _____ _____
City *State* *Zip Code*

_____
Phone No

_____
Owner / Contractor Signature

DESCRIPTION OF WORK

Please sketch lot indicating location of well, on-lot septic, holding tank, sand mount (if applicable), any streams, swales or utilities traversing the property.

THIS PERMIT IS NOT VALID UNTIL SIGNED BY A TOWNSHIP OFFICIAL

_____ FOR: GREENE TOWNSHIP SUPERVISORS

Work Completed on: _____

Date of Inspection: _____ BY: _____

Inspected By: _____

WELL MAY NOT BE USED FOR ANY PURPOSE UNTIL INSPECTED BY TOWNSHIP

08/29/01