



NORTHERN NEVADA PUBLIC HEALTH  
 ENVIRONMENTAL HEALTH SERVICES DIVISION  
 1001 East Ninth Street, Bldg B • Reno, Nevada 89520  
 Telephone (775) 328-2434 • Fax (775) 328-6176  
 www.NNPH.org

**Office Use Only**  
 (Non-Refundable Fees)

Permit # \_\_\_\_\_  
 Fee Paid \_\_\_\_\_  
 Date Paid \_\_\_\_\_  
 Check/Cash/CC \_\_\_\_\_  
 Receipt No. \_\_\_\_\_

**WELL CONSTRUCTION PERMIT  
 APPLICATION**

New                       Deepen                       Abandon                       Replacement

Property owner's name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Home address: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Work phone number: \_\_\_\_\_

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

Address of well site: \_\_\_\_\_

Nearest cross street to well site: \_\_\_\_\_

Geographical area: \_\_\_\_\_

Assessor's parcel number: \_\_\_\_\_

Type of well: \_\_\_\_\_ Use of well: \_\_\_\_\_

Well drilling company (must include): \_\_\_\_\_

State contractor's license number: \_\_\_\_\_

Business license number: \_\_\_\_\_

Well driller's phone number: \_\_\_\_\_

Any state waiver, county variance or special conditions?       Yes\*                       No

**\*If yes, attach a copy to this application.**

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant printed name: \_\_\_\_\_

**Plot plan: Two copies of the plot plan must be attached to this application.**

ORIGINAL | NNPH

YELLOW | APPLICANT