



Alexander P. Grannis
 Commissioner

New York State Water Well Program Registration Form

Annual registration period 4/1/2009 - 3/31/2010

Application is hereby made for Registration with the State of New York to install or repair water wells as set forth under Section 15-1525 of NYS Environmental Conservation Law.

Instructions: Mail completed & signed form with payment to address above.

Check One: ___ New Application, or ___ Renewal (Registration Number _____)

Annual Registration Fee: \$10

(Send check or money order payable to: NYS Dept. of Env. Conservation, do not send cash)

Business or Company Information			(List additional on reverse)		
Business / Company Name:			Federal Business ID [] or Social Security ID [] #		
Address:			Phone 1:	Fax 1:	
City, State, Zip:			Phone 2:	Fax 2:	
Water well services provided (check all that apply)					
<input type="checkbox"/> Residential wells drilled	<input type="checkbox"/> Geothermal wells drilled			<input type="checkbox"/> Well abandonment	
<input type="checkbox"/> Public wells drilled	<input type="checkbox"/> Agricultural wells drilled	<input type="checkbox"/> Injection, drainage wells			<input type="checkbox"/> Well disinfection
<input type="checkbox"/> Commercial wells drilled	<input type="checkbox"/> Monitoring wells drilled	<input type="checkbox"/> Dewatering wells			<input type="checkbox"/> Well deepening
			<input type="checkbox"/> Pump installation		
			<input type="checkbox"/> Pump service		
					<input type="checkbox"/> Clean / Redevelop
Certified Individuals			(List additional on reverse)		
Name	NGWA Constituent or Member ID #	Exam certified for:			
At least one employee must be certified for registration.		Drilling		Pump Service	
		[]		[]	
		[]		[]	
Registered Vehicles			(List additional on reverse)		
Support vehicles (e.g. water trucks) do not require a registration sticker.					
Vehicle Type (Circle One)	License Plate #	State	Vehicle Type (Circle One)	License Plate #	State
Drill Rig / Pump Hoist / Other			Drill Rig / Pump Hoist / Other		
Drill Rig / Pump Hoist / Other			Drill Rig / Pump Hoist / Other		
Owners, Partners, Officers			(List additional on reverse)		
Name	Title			Name	Title

REQUIRED: Circle total water wells drilled in New York State during the period 1/1/2008 - 12/31/2008

Zero wells 1 - 5 wells 6 - 25 wells 26 - 100 wells 101 - 500 wells 500+ wells

Authorized Signature:

(Owner, Partner, Officer) _____

Date: _____

Additional Business or Company Information

Address:

City, State, Zip:

Address:

City, State, Zip:

Phone 1:

Phone 2:

Email Address:

Phone 1:

Phone 2:

Email Address:

Fax 1:

Fax 2:

Fax 1:

Fax 2:

Additional Certified Individuals

Name

NGWA Constituent or
Member ID #

Exam certified for:
Drilling Pump Service

[] []

[] []

[] []

Additional Registered Vehicles

Vehicle Type (Circle One)

License Plate

State

Vehicle Type (Circle One)

License Plate

State

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Drill Rig / Pump Hoist / Other

Additional Owners, Partners, Officers

Name

Title

Name

Title