



Town of Ross

Department of Public Works

P. O. Box 320, Ross, CA 94957

Telephone (415) 453-1453

Fax (415) 460-9761

www.townofross.org

WELL PERMIT APPLICATION

Parcel Address _____

Assessor's Parcel Number _____

Legal Owner of Parcel _____

Mailing Address _____

City _____ State _____ ZIP _____

Day Phone _____ Evening Phone _____

Fax _____ Email _____

Well Contractor _____

Well contractor's copy of Town of Ross Business License must be attached.

Mailing Address _____

City _____ State _____ ZIP _____

Phone _____

Fax _____ Email _____

Well Requirements

Wells installed in the Town of Ross must meet each of the following requirements. Your initial after each requirements indicate, under penalty of perjury, that the statement is true.

This application will result in no more that ONE active well on the property. _____

The proposed well will be located at least five feet from the nearest property line. _____

The proposed well will be located at least fifty feet from any sewer line. _____

The proposed well will be located at least one hundred feet from any subsurface disposal Field. _____

Application Signatures

I HEREBY CERTIFY under penalty of perjury that I have made every reasonable effort to ascertain the accuracy of the data contained in the statements, maps, drawings, plans, and specifications submitted with this application and that said information is true and correct to the best of my knowledge and belief. I understand that any permit issued in reliance thereon may be declared null and void in the event that anything contained therein is found to be erroneous because of an intentional or negligent misstatement of fact.

I further certify that I have read the attached Well Permit Fact Sheet and understand the processing procedures, fees, and application submittal requirements.

Signature of Contractor

Date

Signature of Owner

Date

Waiver and Release of Liability

I HEREBY AGREE to waive and release all claims against the TOWN OF ROSS, its Town Council, officers, agents, employees, assigns, and successors-in-interest, and to hold each of them harmless from and against all liability, including all fees and costs incurred for injuries or damages of any kind which may arise from or be connected in any way with the Town's issuance of a well permit pursuant to this application.

Signature of Owner

Date

Signature of Co-Owner (if applicable)

Date

WELL PERMIT FACT SHEET

Submittal Requirements

The following items are required for all applications. Failure to provide all required materials in a timely manner will delay review and may result in denial.

1. Three complete Well Permit Applications.
2. Three copies of a site plan, drawn to scale, which clearly shows:
 - name, address, and phone number of the owner of record and well contractor;
 - north arrow (north should be at the top of the sheet) and scale;
 - date (***revised copies must be clearly indicated with a new date and marked "revised"***);
 - all dimensions of the property and location of the proposed well source, tank, and/or pump in relation to the property;
 - distance of the proposed well source, tank, and/or pump to the property line(s);
 - all existing and proposed easements;
 - the location, names and existing widths of all adjoining and contiguous streets and ways;
 - all public and/or private sewer pipelines;
 - all subsurface disposal fields;
 - all septic or other subsurface storage tanks;
 - and all animal and fowl enclosures.
3. Every person who engages in any business, trade or occupation within the Town is required to obtain a business license from the Town. A license is required even if the primary place of business is not located within the Town of Ross. All professionals associated with planning applications must obtain required business licenses in conjunction with the planning review of their application.

Processing

The Town of Ross Building Department processes the Well Building Permit application. Upon approval of the Well Building Permit, the applicant or contractor picks up the permit and a copy of the approved plans, which he or she submits to the Marin County Health Department in order to apply for a Drilling Permit. The County Health Department will perform all field inspections. Upon receipt of a Town of Ross Well Building Permit, Marin County Drilling Permit, and completion of work the contractor must submit the Well Data Card (below) to the Building Department.

Well Permit Data Card

Parcel Address _____

Assessor's Parcel Number _____

Legal Owner of Parcel _____

Well Contractor _____

Phone _____

Fax _____ Email _____

Final Well Specifications

Date of Drilling _____ Diameter _____ in.

Depth _____ ft. Flow _____ gpm.

Comments (e.g. dry holes, etc.) _____

