



# SAN JOAQUIN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

600 East Main Street, Stockton, CA 95202-3029  
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LOP  
SITE MITIGATION  
UNIT IV

## WELL & BORING PERMIT APPLICATION

FOR WELLS AND BORINGS USED FOR CONTAMINANT INVESTIGATIONS AND REMEDIATION

NON-REFUNDABLE PERMIT EXPIRES 1 YEAR FROM DATE ISSUED

Application is hereby made to San Joaquin County for a permit to construct and/or install the work described. This application is made in compliance with San Joaquin County Development Title, Chapter 9-1115.3, and the Standards of the San Joaquin County Environmental Health Department.

Site Location \_\_\_\_\_ Cross Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ APN \_\_\_\_\_  
 Property \_\_\_\_\_  
 Owner \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
 C-57 Contractor \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ Lic \_\_\_\_\_ Phone \_\_\_\_\_  
 Consultant/Sub Cntr \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ Lic \_\_\_\_\_ Phone \_\_\_\_\_  
 Billable Party \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
 GIS Coordinates: X \_\_\_\_\_ Y \_\_\_\_\_

### CONSTRUCTION WORK TO BE PERFORMED:

NEW WELL/BORING (CPT, GEOPROBE, HYDROPUNCH, HAND-AUGER, OTHER)  
 SOIL BORING IDs \_\_\_\_\_  
 WELL IDs \_\_\_\_\_  
 OTHER IDs \_\_\_\_\_

TYPE & # OF WELL/BORING	INSTALLATION TYPE	CONSTRUCTION SPECIFICATIONS
<input type="checkbox"/> MONITORING	<input type="checkbox"/> HOLLOW STEM	DIA. OF BOREHOLE _____ <input type="checkbox"/> MULTIPLE CASINGS <input type="checkbox"/> MULTI-LEVEL WELL CASING DIA: _____
<input type="checkbox"/> EXTRACTION: Vapor/ Water	<input type="checkbox"/> HAMMER/DRIVEN	CASING THICKNESS _____ TYPE OF CASING: <input type="checkbox"/> STEEL <input type="checkbox"/> PVC <input type="checkbox"/> OTHER _____
<input type="checkbox"/> SOIL VAPOR PROBE	<input type="checkbox"/> MUD ROTARY	DEPTH OF GROUT SEAL _____ TREMIE TYPE TO BE USED: <input type="checkbox"/> AUGERS <input type="checkbox"/> HOSE <input type="checkbox"/> PIPE
<input type="checkbox"/> SOIL BORING	<input type="checkbox"/> PUSH POINT (GP/ CPT)	GROUT SEAL PUMPED: <input type="checkbox"/> Yes <input type="checkbox"/> No (MAXIMUM FREE FALL DEPTH IS 30 FT)
<input type="checkbox"/> INJECTION (i.e. Air Sparge, Ozone)	<input type="checkbox"/> HAND AUGER	GROUT SPECIFICATIONS _____
<input type="checkbox"/> OTHER: _____	<input type="checkbox"/> OTHER: _____	APPROX. BORING DEPTH _____ <input type="checkbox"/> BOLTED TRAFFIC BOX OR <input type="checkbox"/> STOVE PIPE
		CONDUCTOR CASING <input type="checkbox"/> No <input type="checkbox"/> Yes: Casing Dia: _____ Casing Depth: _____ Boring Dia: _____

COMMENTS: \_\_\_\_\_

### NOTE: OFFSITE WELLS & BORINGS REQUIRE ACCESS AGREEMENTS OR ENCROACHMENT PERMITS

### DESTRUCTION WORK TO BE PERFORMED:

# OF WELL(S) TO BE DESTROYED \_\_\_\_\_  
 WELL IDs: \_\_\_\_\_  
 GROUT SPECIFICATIONS \_\_\_\_\_  
 TREMIE TYPE TO BE USED:  AUGERS  HOSE  PIPE  
 COMMENTS \_\_\_\_\_

### DESTRUCTION METHOD: (CHECK ALL THAT APPLY)

OVER-BORE DIAMETER OF \_\_\_\_\_ INCHES TO DEPTH OF \_\_\_\_\_ FT  
 PRESSURE GROUT TO DEPTH OF \_\_\_\_\_ FT BELOW SURFACE  
 EXPLOSIVES FROM \_\_\_\_\_ TO \_\_\_\_\_ FT BELOW SURFACE  
 MUSHROOM CAP AT ( $\geq$ 3 FT) \_\_\_\_\_ FT BELOW SURFACE

### 5 WORKING DAYS NOTICE REQUIRED (AFTER PERMIT ISSUANCE) FOR INSPECTION APPOINTMENTS

I hereby certify that I have prepared this application and that the work will be done in accordance with San Joaquin County Ordinances, Rules and Regulations, and all applicable California Laws.

Signed \_\_\_\_\_ Title/Company \_\_\_\_\_  
 Print Name \_\_\_\_\_ Date \_\_\_\_\_

### DEPARTMENT USE ONLY

SITE MAP IN UNIT IV FILE SITE ADDRESS \_\_\_\_\_  
 WORK PLAN DATED \_\_\_\_\_  
 APPLICATION ACCEPTED BY \_\_\_\_\_ DATE ISSUED \_\_\_\_\_ AREA \_\_\_\_\_  
 GROUT INSPECTION BY \_\_\_\_\_ FINAL INSPECTION BY \_\_\_\_\_ DATE \_\_\_\_\_  
 DESTRUCTION INSPECTION BY \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS/CONDITIONS: \_\_\_\_\_

ACCOUNTING ONLY:		AID #	FAC #		SERVICE REQUEST	RO # PR #	INVOICE
PE CODES	FEE INFO	AMT REMITTED	CHECK #	REC'D BY	DATE	SR#	
	\$ 125 x					RO # (3500)	
						PR # (2900)	

San Joaquin County Environmental Health Department  
**WELL & BORING PERMIT APPLICATION SUPPLEMENTAL**

**JOB ADDRESS:** \_\_\_\_\_ **PERMIT SR #** \_\_\_\_\_

**LICENSED CONTRACTORS DECLARATION (LCD)**

I hereby affirm that I am licensed under the provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

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

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Print Name: \_\_\_\_\_

**WORKERS' COMPENSATION DECLARATION**

I hereby affirm under penalty of perjury one of the following declarations: **(check one)**

\_\_\_\_\_ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

\_\_\_\_\_ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy numbers are:

**Carrier:** \_\_\_\_\_ **Policy Number:** \_\_\_\_\_

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation law of California, and agree that if I should become subject to workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

**Exp. Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO \$100,000, IN ADDITION TO THE COST OF COMPENSATION, INTEREST, ATTORNEY'S FEES, AND DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE.**

**AUTHORIZATION FOR OTHER THAN C-57 SIGNING PERMIT APPLICATION**

I, \_\_\_\_\_ (signature of C-57 licensed authorized representative),  
hereby authorize (print name) \_\_\_\_\_, to  
sign this San Joaquin County Well & Boring Permit Application on my behalf. I understand this authorization  
is valid for one year and is limited to the work plan dated on the front page of this application.