

WATER WELL CONTRACTOR LICENSE
Application Form

1. APPLICANT: Name _____ Date of Birth _____
Address _____
City _____ State _____ Zip Code _____
Telephone Number _____
Email _____

2. BUSINESS: Company Name _____
Address _____
City _____ State _____ Zip code _____
Telephone Number _____
Email _____

3. EXPERIENCE RECORD:

- (a) Have you ever been denied a driller's license or had a driller's license revoked, cancelled, or suspended by any state? ___yes ___no
If you checked yes, provide the details in Block 6 ADDITIONAL INFORMATION / COMMENTS including the date and reason the action was taken, and the state in which the action was taken.
- (b) How many years experience do you have in drilling, where you were actually responsible for operating the drilling rig? _____
- (c) How many drilling projects have you completed in the past five (5) years? _____
- (d) Of the number included in 3.(c), how many were: Home wells _____
Industrial wells ___ Public Water Supply wells _____ Irrigation wells _____
Geotech boreholes _____ Ground source heat pump holes _____
Monitoring wells _____ Seismic exploration holes _____ Other (specify) _____
- (e) What was the depth of the deepest well or borehole you have drilled? _____
- (f) What was the diameter of the largest well you or borehole you have drilled? _____
- (g) Are you a licensed driller in another state? ___ If so, What state? _____
- (Attach a copy of your current license from the state named above to this application.)

4. REFERENCES:

- (a) Provide the names, license numbers, licensing state, and contact information for three (3) licensed drillers who have supervised your work and/or have first hand knowledge of your qualifications and experience in the field for which you are seeking a license.

Provide a Notarized Affidavit from each of the references listed attesting to your qualifications and experience.

Name _____ Lic. No. _____ Licensing State _____
Address _____ Telephone No. _____
City _____ State _____ Zip Code _____

Name _____ Lic. No. _____ Licensing State _____
Address _____ Telephone No. _____
City _____ State _____ Zip Code _____

Name _____ Lic. No. _____ Licensing State _____
Address _____ Telephone No. _____
City _____ State _____ Zip Code _____

- (b) Provide the names and contact information of two (2) clients, not related to you, for whom you have completed drilling projects.

Name _____ Telephone No. _____
Address _____
City _____ State _____ Zip Code _____

Name _____ Telephone No. _____
Address _____
City _____ State _____ Zip Code _____

5. DESCRIPTION OF DRILLING EQUIPMENT YOU WILL USE, IF YOU ARE LICENSED:

- (a) Drill Rig: Make and Model _____

Maximum Capability (depth in feet) _____

- (b) Water Tank Truck: Make and Model _____

- (c) If the above listed equipment is owned by someone other than yourself, provide the name, telephone number, and address of the owner:

Name _____ Telephone No. _____

Address _____

City _____ State _____ Zip Code _____

- (d) If the equipment you plan to use is not commercially manufactured, attach a detailed description and photograph of the equipment.

6. ADDITIONAL INFORMATION / COMMENTS: _____

7. I hereby certify, under penalty of revocation of any license issued pursuant to this application, that the information I have provided in this application is true and correct, to the best of my knowledge. I further grant my references authority to provide information regarding my experience and qualifications related to the license I am seeking to the Mississippi Department of Environmental Quality in support of this application.

Signature of Applicant

NOTARY:

STATE OF _____, COUNTY OF _____

THIS DAY, _____ personally came and appeared before the undersigned authority in and for the aforesaid jurisdiction.

SWORN to and subscribed before me on this the _____ day of _____, 20____.

My Commission expires: _____

NOTARY PUBLIC