



# Well Upgrading Application Form

## Water Well Improvement Program 2020-2021

### APPLICANT INFORMATION

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Non-Farm Residential       Farm       Environmental Farm Plan

Phone (home): ( ) \_\_\_\_\_ Phone (cell): ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Street Address (well) \_\_\_\_\_ Postal Code: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

Legal Address      Mun./ Fmr Twp: \_\_\_\_\_      Conc.: \_\_\_\_\_      Lot: \_\_\_\_\_

Of Well LCN      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_

### CURRENT CONDITIONS AND REASONS FOR APPLYING (PLEASE SELECT ALL THAT APPLY):

Age of Well \_\_\_\_\_ Depth of Well \_\_\_\_\_ Diameter of Well \_\_\_\_\_

Is the well within a Municipal Drinking Water Wellhead Protection Area (WHPA)?

Yes     No     Unsure

If Yes, what Municipal WHPA is it in/ and zone? \_\_\_\_\_

Please indicate construction of the well:     Dug     Drilled     Bored     Sandpoint

Has the water quality been tested (e.g.by the Health Unit);     Yes     No

Please indicate the steps you will take to upgrade the well:

- Installing a pitless adapter to replace drilled well pit.
- Upgrading or replacing damaged well casing.
- Extending well casing to 16 inches (40 cm) above the finished grade.
- Installing proper well head cap (vermin proof).
- Sealing annular space around well casing.

Other. Please Explain:

.....  
 Is this a retroactive project? If yes, please provide date of work started \_\_\_\_\_



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**PROPOSED PROJECT(S) & ESTIMATED COSTS(S)**

**ALL work is to be completed by a licensed well contractor in compliance with R.R.O, 1990: Wells, Ontario Regulation 903 of the Water Resources Act**

**Estimated Cost**

Upgrading water well

\$

**Total Estimated Costs:**

\$

1. Are you currently receiving or applying for additional funding for upgrading your well(s)?  Yes  No

2. If yes, please indicate the name of the program/project, and to whom you are applying/have applied:

3. Do you receive an HST Rebate?  Yes  No

4. Attached is a copy of the existing well record  Yes  No (not available)

5. Photograph: Please provide a photography of the well conditions

6. Additional Comments:

**WELL UPGRADING PROJECT AGREEMENT**

I have read, understood, and agree to the project guidelines and the terms of funding assistance for the Water Well Improvement Program (WWIP) – Well Upgrading funding.

Signature of Applicant

Date

I, \_\_\_\_\_, (*Signature of Applicant*) hereby declare that I will not receive more than 100 percent of the total cost of this project.



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**WELL RECORD, WELL CONTRACTOR LICENCE, & COST ESTIMATE**

**Please check the following:**

I HAVE COMPLETED THE APPLICATION IN FULL, THE WELL CONTRACTOR LICENCE, AND A COST ESTIMATE FOR THE PROPOSED PROJECT.

❖ In addition to copies of paid invoices/proof of payment, please note that you will be required to submit a copy of the new well record and a copy of the well contractors' valid license prior to receiving funding.



NUCLEAR WASTE  
MANAGEMENT  
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DES DÉCHETS  
NUCLÉAIRES

## Water Well Improvement Program 2020-2021

### SITE PLAN

Please use the grid below to provide a sketch of the proposed project site. Please mark directional north, as well as the following:

- Scale (Note you can use a copy of an aerial photography to assist)
- Location of abandoned well(s)     Access Routes/Roads
- Wellhead distance from:
  - Surface water sources, drain, ditch or tiled fields
  - Septic field, manure storage or fuel/fertilizer storage
  - Building structures
  - Roadways
  - Any additional information of interest
- Ground surface features surrounding wellhead (stream, pond, tile field)
- General topography (even and level, hilly, steep, depression)



**Water Well Improvement Program  
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**SITE PLAN**

NORTH
