

# BUCKINGHAM TOWNSHIP

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Website - [www.buckinghampa.org](http://www.buckinghampa.org)



## Well Application

Tax Parcel Number: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Property Owners Signature: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**Driller Declaration:** I certify that the location herein proposed is accessible and meets all isolation distances presented in the Bucks County Department of Health Individual Water Supply Well Construction Specifications, BCDH-Adm-Specs, Section 1.

Well Driller: \_\_\_\_\_ NGWA CWA Number: \_\_\_\_\_

Well Drillers Signature: \_\_\_\_\_

Drillers Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

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Address of Drill Site: \_\_\_\_\_

Use of Well:  New  Replacement  Monitoring  Agricultural  Geothermal

Permit Number _____
Fee: _____
Escrow: _____