

township of

Phone: 215-348-9915 • Fax: 215-348-8729

Website: www.doylestownpa.org



doylestown

425 Wells Road • Doylestown, PA 18901

WELL PERMIT APPLICATION

Street Address for Well Location			City and State		Zip
Subdivision	Lot Number	Parcel Number	Zoning District	Date	

Property Owner: _____

Address: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Tenant: _____

Address: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Contractor: _____ State Contractor Lic. No: _____

Address: _____

Office Phone: _____ Cell Phone: _____ E-mail: _____

All contractors are to supply a certificate of insurance providing evidence of statutory Workers Compensation Insurance and Commercial General Liability Insurance with a minimum limit of \$1,000,000 per occurrence. Doylestown Township, its elected and appointed officials, and employees shall be named additional insured under the contractor's General Liability Insurance policy.

Note: Before this Doylestown Township Well Permit Application can be accepted, the applicant must first have applied to Bucks County Health Department (BCHD) for a Well Permit and have secured their approval. Two (2) copies of the BCHD Permit and two (2) copies of the approved site plan, showing all required dimensions and features are to be attached to this application. The fee for this permit is per the Doylestown Township fee schedule, and can be accessed on the Doylestown Township website at www.doylestownpa.org.

- Two (2) copies of BCHD Permit attached**
- Two (2) copies of approved site plan attached**

Information on the Bucks County Health Department Inspection and Certification Program, along with permit application forms can be obtained from: www.buckscountv.org or in person at:

Neshaminy Manor Center
 Building K Health Building
 Route 611 & Almshouse Road
 Doylestown, PA 18901
 Phone: 215-345-3318

Information required for this Doylestown Township Well Permit:

Demand Category (gallons per day):

LESS THAN 1000 gallons per day
 1000 gpd or more up to 10,000 gpd

- Township Manager approval required
- Board of Supervisors approval required

Quality of Well:

Test done in accordance with Bailor test minimum of 6 gallons per minute.

New Well: _____ Re-Drilling: _____

Water Quality Testing Service:

Name: _____

Address: _____

Contact Number: _____ E-mail: _____

PLEASE NOTE: The property owner(s) must sign this application to verify the contractor or tenant has permission from the property owner(s) to do all construction work authorized by the issuance of this permit. All work to comply with Doylestown Township Code CH.170 WATER and CH.172 WELLS.

By signing this application, authorization is granted to any municipal representatives of Doylestown Township to access the above property as stated within this application and attached sub-trade permit application at any time, without an administrative warrant, to inspect and verify that any proposed use and/or structure contained within this application and/or that exists on the above property complies with all Doylestown Township zoning and building code ordinances.

The application together with the site plan and construction documents is made a part of this application by the undersigned. Furthermore, it is clearly understood and agreed to by the applicant and property owner that the Township office is not responsible for any property dimensions shown on the site plan and establishment of property lines is the sole responsibility of the property owner and applicant. The applicant and property owner also agree they are responsible for the replacement to Township standards of any Township road or infrastructure which is damaged during the building of the permitted structure and understands that the information provided on this application by the applicant(s) and property owner(s) is true and correct to the best of their knowledge or belief, and all information contained in their application becomes part of the public record. The applicant warrants the truthfulness of the **information** in the application, and that if any of the information provided is incorrect, the permit may be revoked. Furthermore, the application and permit can provide that if the permit is issued wrongfully, whether based on misinformation or an improper application of the code, the permit and certificate of occupancy may be revoked.

Written approval of final inspections will be required from all other agencies issuing permits for this project before a Certificate of Compliance/Occupancy can be issued. By signing this application, the applicant certifies that all the information is correct and that the property owner has authorized work and inspection of that work.

A Certificate of Compliance/Occupancy will only be issued once the Township receives a copy of the water quality testing results indicating potable water.

Date: _____ Signature of Applicant(s) _____

Print Applicant(s) Name(s) _____

Date: _____ Signature of Property Owner(s) _____ **(Required)**

Print Property Owner(s) Name(s) _____ **(Required)**

For Township Use Only:

Twp. Manager Approval: Signature: _____ Print: _____ Date: _____
 Board of Supervisors Approval: Signature: _____ Print: _____ Date: _____