

City of Brentwood Planning and Codes Department 5211 Maryland Way P.O. Box 788 Brentwood, TN 37024-0788 Office (615) 371-2204 Fax (615) 371-2233

Inspection Request Internet (615) 661-7077 www.brentwood-tn.org

Begin using this document March 1, 2011

Commercial / Residential * Water Well Drilling Permit Application *

ERMIT APPLICATION DATE: _	, 201
HECK ALL THAT APPLY FROM	THE FOLLOWING:
☐ Commercial	
Irrigation □	Geo –Thermal □
Other □ (if Oth	ner, describe):
☐ Residential	
Irrigation	Geo –Thermal □
Other □ (if Oth	er, describe):
ROJECT INFORMATION	
PROPERTY OWNER INFORMATION	ON
	: Project:
Address, If Different From	Project:
Address, If Different From City, State:	Project: Zip Code:
Address, If Different From City, State:	Project: Zip Code:
Address, If Different From City, State:	Project: Zip Code:
Address, If Different From City, State: VATER WELL DRILLER'S INFORT Applicant Name: Applicant's Company Nam Licensed Driller's Certificat	Project: Zip Code: RMATION e: ion Number:
Address, If Different From City, State:	Project: Zip Code: Zip
Address, If Different From City, State:	Project: Zip Code: EMATION e: ion Number: Policy Number: ber: ()
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Address, If Different From City, State:	EMATION E:
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(CONTINUED ON BACK)

♥ E	ESTIMATED PROJECT COMPLETION DATE	
	Provide your estimated date of completion for this water we	ell project. NOTE: A Final Inspection is required.
	Estimated Date of Completion Is:	, 201
♦ N	NOTICE TO APPLICANT / CONTRACTOR	
	The following act is prohibited: the installation, allowing connection, auxiliary intake, or bypass, unless the source method of connection, and the use and operation of such been approved by the Tennessee Department of Environment	e and quality of water from the auxiliary supply, the h cross connection, auxiliary intake, or bypass has
	Application and permit become void if work is not commen	ced or is idle for more than 180 days.
• <u>s</u>	SELECT AND SIGN ONE OF THE FOLLOWING OPTIONS:	
1.)	I PLAN TO PERFORM ALL ASSOCIATED ELECTRICAL I SWEAR, AFFIRM AND CERTIFY THAT I HAVE AP ELECTRICAL PERMIT(S) REQUIRED TO COMPLETE TO	PLIED FOR AND OBTAINED ALL NECESSARY
	ELECTRICAL PERMIT NUMBER IS:	
	*	:
	SIGN HERE IF YOU HAVE OBTAINED ALL ELECTRICA	L PERMITS YOURSELF;
<u>0</u>	SIGN HERE IF YOU HAVE OBTAINED ALL ELECTRICA	L PERMITS YOURSELF;
<u>O</u> 2.)		ANY ASSOCIATED ELECTRICAL WORK TRICAL CONTRACTOR PERFORMING SAID
	OR, NEITHER I NOR MY EMPLOYER PLAN TO PERFORM A AND CONSEQUENTLY, I HAVE PROVIDED THE ELECT	ANY ASSOCIATED ELECTRICAL WORK TRICAL CONTRACTOR PERFORMING SAID
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2.)	OR, NEITHER I NOR MY EMPLOYER PLAN TO PERFORM A AND CONSEQUENTLY, I HAVE PROVIDED THE ELECT WORK AND HIS/HER CONTACT INFORMATION BELO *	ANY ASSOCIATED ELECTRICAL WORK FRICAL CONTRACTOR PERFORMING SAID W: ()
2.)	OR, NEITHER I NOR MY EMPLOYER PLAN TO PERFORM A AND CONSEQUENTLY, I HAVE PROVIDED THE ELECT WORK AND HIS/HER CONTACT INFORMATION BELO * ELECTRICAL CONTRACTOR'S NAME	ANY ASSOCIATED ELECTRICAL WORK FRICAL CONTRACTOR PERFORMING SAID W: TELEPHONE NUMBER NED THIS APPLICATION AND KNOW THE SAME AWS AND ORDINANCES GOVERNING THIS R SPECIFIED HEREIN OR NOT. THE GRANTING
2.) ↑ <u>A</u>	OR, NEITHER I NOR MY EMPLOYER PLAN TO PERFORM A AND CONSEQUENTLY, I HAVE PROVIDED THE ELECT WORK AND HIS/HER CONTACT INFORMATION BELO * ELECTRICAL CONTRACTOR'S NAME ACKNOWLEDGE AND CERTIFY I HEREBY CERTIFY THAT I HAVE READ AND EXAMINATION BE TRUE AND CORRECT. ALL PROVISIONS OF LA TYPE OF WORK WILL BE COMPLIED WITH WHETHE OF A PERMIT DOES NOT PRESUME TO GIVE AUTHOR	ANY ASSOCIATED ELECTRICAL WORK FRICAL CONTRACTOR PERFORMING SAID W: TELEPHONE NUMBER NED THIS APPLICATION AND KNOW THE SAME AWS AND ORDINANCES GOVERNING THIS R SPECIFIED HEREIN OR NOT. THE GRANTING RITY TO VIOLATE OR CANCEL THE HER STATE OR LOCAL LAW REGULATIONS.
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