845-583-4350 Ext 15



## Town of Bethel Building Department

PO Box 300, 3454 Route 55 White Lake, NY 12786

## Application for Well Permit

Date:	Bethel Tax Map #:
Name:	Phone Number:
Street Location:	
Put Diagram below: (Use measurements)	To be filled out after well is complete:  Casing:
	First Water:
	Total supply of water at completion:
	Depth of Well:
	Static Water Level:
	Suggested depth for pump:
	Comments:
Driller:	Phone Number:
Address:	
enforced in the Town of Bethel, application will conform with su	all the Municipal, Building, Dwelling Laws and Codes and Ordinances New York and hereby agree that the project proposed on this ach. Well pump wiring shall be installed in accordance with the rs shall have their wiring inspected by an approved Electrical Inspector.
Signature of Applicant or Agent	
*********	****************
For Office Use Only:	
Fee: \$20.00 Approved:	Date of Permit: Rejected: