

Town of Bethel Building Department

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White Lake, NY 12786
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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: _____

I, as applicant, am familiar with all the Municipal, Building, Dwelling Laws and Codes and Ordinances enforced in the Town of Bethel, New York and hereby agree that the project proposed on this application will conform with such. Well pump wiring shall be installed in accordance with the National Electric Code. Installers shall have their wiring inspected by an approved Electrical Inspector.

Signature of Applicant or Agent

For Office Use Only:

Fee: \$50.00 Date of Permit: _____
Approved: _____ Rejected: _____