

NECHES & TRINITY VALLEYS GROUNDWATER
CONSERVATION DISTRICT
OPERATING PERMIT RENEWAL/AMENDMENT
REQUEST FORM

Company/City: _____

Address: _____

Phone: _____ **Fax:** _____

Contact: _____

Please Renew/Amend the following Operating Permits

Well number/ Name	Permit number	Casing size in inches	In operation yes/no	GPM	Annual production 1000 gallons/year

_____ Signature of authorized official
_____ Title
_____ Date

<u>District Use Only</u>
Date Received _____
Fee Due _____
Date Renewed/Amended _____
MG/Y Total _____