

PLUMSTEAD TOWNSHIP

5186 Stump Road, Pipersville PA 18947 Phone: (215) 766-8914 www.plumstead.org

OFFICIAL USE ONLY
Date Rec.:
App Fee Paid:
Check #:
Receipt #:

WELL PERMIT APPLICATION

Permit #:

Site Address for Well:		TMP#	:
	Name		
Property Owner	Address		
	Phone	Email	
	Name		
	Address		
Well Driller Company	Phone	Email	
	State License #		
Use for Water		Distance from Well to	Wastewater System
Individual (Residential)		Cesspools	
☐ Public		Septic Tanks	
		Drain Field	
Other:		Spray Irrigation*	
		*Denotes zone	of saturation
Type of Construction			
Class II Well – Wells or V	ump less than 1,000 gallons per day Well Cluster to pump between 1,00 Well Cluster to pump 10,000 gallon Cand PADEP.		riod and are subject to approval by
Geothermal Well Monitoring / Testing W	ell		
Provide 3 (Three) paper cop the following:	pies AND digital copy (emailed via	DropBox or OneDrive to mstorti@plu	mstead.gov) of Plot Plan showing
 Property Li 	nes	Well Locations	
Streets		 Separation Distances 	
	er Disposal Areas	 Parking Lots & Driveways 	
Building Lo	-	Easements and Deed Restricted	areas
Water Requirements: Show information on plot p	olan.		

dwelling unit, use the NJ Two-Part Test Method to determine the daily requirement. For Class 2 and Class 3 Wells, the information required can be included in the hydrogeologic report required by §26-202.5 of the Township Code.

*Use this area to indicate the amount of water that your project will require in gallons per day (gpd). If the proposed well is for a new

WATER CERTIFICATION

Within 30 days of requesting issuance of an Occupancy Permit the well shall be tested and a water quality certificate meeting or exceeding the Commonwealth of Pennsylvania's drinking water requirements shall be submitted to Gilmore & Associates, the Plumstead Township Hydrogeologist. The water quality certification shall include the laboratory's address and Commonwealth of Pennsylvania license number.

The undersigned herby affirms that the foregoing information is true and correct to the best of said persons knowledge, information, and belief; said affirmation being made subject to the penalties prescribed in the 18 Pa. C.S.A. Section 4904 (unsworn falsification to authorities).

Note: Prior to the issuance of a Building Permit, the well must be drilled, tested, and certified by the well driller (residential) or geologists (non-residential) to be in compliance with the Plumstead Township Well Ordinance, §26-200 of the Township Code.

Owner's Name (print):	
Owners Signature:	Date:
Well Driller's Name (print):	
Well Driller's Name Signature:	Date:
The remainder of the application is to be complete	ted after the well has been drilled and various tests have been performed.
For Township Hoo Only	
For Township Use Only: Township Zoning Officer:	
(Print Name	Date:
Township Zoning Officer:	

WELL DRILLING LOG

RETURN COMPLETED LOG TO THE TOWNSHIP

Date: _____

			Time:
Project Name:			
Well Identification:	Depth:	Diameter:	Casing:
	Name		
	Address		
Well Driller	Phone	Email	
	State License #		
Comments:			

INTERVAL (FEET)	GEOLOGICAL DESCRIPTION (TYPE OF ROCK)	YIELD (GPM)	COMMENTS
	,	, ,	

INTERVAL (FEET)	GEOLOGICAL DESCRIPTION (TYPE OF ROCK)	YIELD (GPM)	COMMENTS

LIST OF PARAMETERS TO BE ANALYZED FOR CLASS 1 WELLS

Secondary Contaminants

6.5 – 8.5 units N/A Degrees
250
250
500
120-150
15 Color Units
3 (Threshold Order Number)
0.5 to 1 NTU
0.3
0.05
1

SMCL + Secondary Maximum Contaminant Level

Microbiological Contaminants

Coliform Bacteria	0	

Primary Contaminants

Parameter	MCL (mg/L or as noted)
Arsenic	0.01
Lead	0.005
Mercury	0.002
Nitrate	1
Nitrate	10
Volatile organic compounds ¹ (VOCs, to include MTBE)	As Applicable

MCL = Maximum Contaminant Level

¹ pH and temperature can be measured in the field.

² Concentration beyond which softening is recommended.

³ Performance standards

¹ The concentration of volatile organic compounds shall meet the primary drinking water standards established by the EPA.

WELL COMPLETION FORM

RETURN COMPLETED LOG TO THE TOWNSHIP

Date of Well Completion: _____

	Name		
Property Owner	Address		
	Phone	Email	
	Name		
	Address		
Well Driller Company	Phone	Email	
	State License #		
A. Use of Well			
☐ Dom	estic		
Prod	uction		
☐ Mon	itoring		
Othe	r:		
B. Estimated average da	ily water use during peak 30-day period	l?gpd	
C. Wastewater Disposal			
	c System		
	y Irrigation		
Othe	r:		
D. Drilling Method:			
E. Dept Drilled:	below land surface	F. Dept of Completed Well:	BLS
G. Grout Information (ft. b	elow land surface)		
Grout Top:	Grout Bottom:		

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Н	Casing	Information	(ft	helow	land	surface)
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I. Pump Information

	Depth to Top	Depth to Bottom	Diameter (in)	Material (steel, Iron, PVC)
Casing 1				
Casing 2				
Open Hole				
•	ding Zone (ft. below	<i>r</i> surface)	vield (anm)	Method of Treatment if required
•		surface)	yield (gpm)	Method of Treatment if required
•		v surface)	yield (gpm) yield (gpm)	Method of Treatment if required
Pepth to Water Yie		v surface)		·
· ·		v surface)	yield (gpm)	

Installation Date:			
Pump manufacture and type:			
Motor Capacity:	Pump Capacity:	Pump Intake setting:	ft. bls
Current water level:	ft. bls		

Pump Installer	Name		
	Address		
	Phone	Email	
Geologist Supplying Data	Name		
	Address		
	Phone	Email	

Owner's Name (print):	
Owners Signature:	Date:
Well Driller's Name (print):	
Well Driller's Name Signature:	Date: