

**Grays Harbor  
County**

STATE OF WASHINGTON



**DEPARTMENT OF PUBLIC SERVICES**

DIVISION OF ENVIRONMENTAL HEALTH

100 W. BROADWAY, SUITE 31

MONTESANO, WASHINGTON 98563

PHONE (360) 249-4222

FAX (360) 249-3203

**Public Well Site Application**

(Group A and B Water Systems)

Fee \$440

FOR OFFICE USE ONLY	DATE STAMP
System/Folder Name: _____	
Intake By: _____	
Fee Paid: _____ Receipt # _____	

- New Well (Site approval required prior to well construction)  
 Existing Well (Water Well Report/Well Log needs to be provided with application)  
 Group A                       Group B                      ID# \_\_\_\_\_ (For existing water system)

Property Tax Parcel #s to receive water service: \_\_\_\_\_

Project and or Name of Water System: \_\_\_\_\_

**Owner/Applicant**     **Applicant Only**

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: WA Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(As owner, or agent on owner's behalf, I hereby affirm and certify that the information provided is accurate and grant employees of Grays Harbor County access to the property and structures for review and inspection of this project)

**OWNER** (if different from Applicant)

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: WA Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

**SITE ADDRESS:** \_\_\_\_\_

Township \_\_\_\_\_ N    Range \_\_\_\_\_ W    Section \_\_\_\_\_

Directions to Property: \_\_\_\_\_

**Has this property been the subject of a Washington State Department of Natural Resources (DNR) Class I, Class II, or Class III Forest Practices Approval (FPA) development moratorium during the past 6 years?**     Yes     No

