

County of Ventura
Public Works Agency
Water Resources Division

APPLICATION FOR CERTIFICATE OF EXEMPTION

SWN _____ APN _____
 Owner _____ Well Location _____
 Address _____
 _____ Owner's Phone _____

USE	WELL DEPTH	PERFORATIONS	DRILLING METHOD	YEAR DRILLED
Agricultural _____	_____ ft	From _____ to _____ ft	Rotary _____	
Cathodic _____	DIAMETER	From _____ to _____ ft	Cable _____	
Domestic _____	_____ in	From _____ to _____ ft	Other _____	
Industrial _____		From _____ to _____ ft		
Municipal _____		From _____ to _____ ft		

ANNULAR SEAL ON WELL Yes _____ No _____	If Yes, SEALING ZONES From _____ to _____ ft From _____ to _____ ft From _____ to _____ ft	Fee \$ _____ Paid On _____ Receipt Number _____
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Attached Water Well Condition Report is hereby submitted in accordance with Section 4817.E. of the Ventura County Well Ordinance for the purpose of applying for a Certificate of Exemption. I certify that all information submitted is correct to the best of my knowledge and said report was prepared by a Registered Inspector as defined in Section 4812 of said well ordinance.

Owner's Signature _____ Date _____
 Registered Inspector's Signature _____ Date _____

DISPOSITION OF COE APPLICATION

Approved

Application incomplete

Denied

Reasons for Incomplete/Denial _____

Well ID No. _____ COE No. _____ Date Issued _____ Expiration Date _____

Public Works Director _____