

WATER WELL PERMIT APPLICATION

Type of Permit (Please check the appropriate box below)

<input type="checkbox"/> Construction	\$721	[4669]	New or Replacement well.
<input type="checkbox"/> Modification	\$721	[4669]	Includes the deepening of a well, re-perforation, sealing or replacement of well casing.
<input type="checkbox"/> Destruction	\$761	[4668]	Abandonment: The complete filling of a well.

FOR OFFICE USE ONLY
Rec'd Date: _____
Rec'd By: _____
WP # _____
District # _____

Required Attachments: Plot plan indicating the location of the well with respect to the following items:

- Property lines.
- Drainage pattern of the property.
- Access roads and easements (water, sewer, utility, roadway).
- Existing and/or proposed structures.
- Existing wells within a 100 foot radius of the proposed well.
- Animal or fowl enclosure, pens, paddocks, stockyards within a 100 foot radius of proposed well site
- Sewage disposal systems or works carrying or containing sewage or industrial wastes within a 200 foot radius of the proposed well.
- All perennial, seasonal, natural, or artificial water bodies or watercourses, including location of 100 year floodplain, if applicable.
- Also Required: the Supplemental Form on page 3, completed in full.

OWNER Info:

Well Owner Name (Required): _____ Primary Phone (____) _____

Owner Mailing Address: _____
 Street Number and Name City State/ Zip Code

Complete this section if the person coordinating the project is other than the Well Owner (e.g., driller, contractor).			
Project Coordinator/Certified Professional Name: _____			
Mailing Address: _____			
Street Number and Name		City	State / Zip Code
Primary Phone: (____) _____	Email: _____		

WELL Location Info:

Well Location Address: _____
 Street Number and Name City State / Zip Code

Cross Street (or other information defining the Well location) if applicable: _____

Assessor's Parcel Number (APN): _____ - _____ - _____

Longitude: _____ Latitude: _____ Elevation: _____

A. Is parcel located within the service area of a public water system? No Yes (Identify): _____

A-1. If you answered **Yes** to question A.: Are you connected to the Public Water System (i.e., do you have a meter?) No Yes

A-2. If you answered **No** to the question A-1.: Is public water service available? No Yes

Proposed Depth _____ ft.	Casing Information
Well Bore Diam. _____ in.	
Sealing Material (Check)	
<input type="checkbox"/> Neat Cement <input type="checkbox"/> Clay	Type: <input type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other _____
<input type="checkbox"/> Cement Grout <input type="checkbox"/> Concrete	Wall / Gauge _____ in. Diameter _____ in. Annular Seal Depth _____ ft.
	Additional Work Description: _____

	Note: A minimum 50 ft. annular seal is required for all wells.

LEGAL DECLARATION

LICENSED CONTRACTOR DECLARATION

I hereby affirm that I am licensed under the provisions of Chapter 9 (commencing with Sec. 7000), Division 3 of the Business and Professions Code (B&PC) as a well drilling contractor (C-57 license) and such license is in full force and effect.

_____ **Print Name of Driller** _____ **Signature of Driller** _____ **Date** _____
Lic. No.: _____ Primary Telephone _____ Other Phone: _____
Business Name: _____ Address _____

(Complete A or B)

A. WORKERS' COMPENSATION DECLARATION

I hereby affirm that (check the applicable box):

- I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.
- I have and will maintain workers' compensation insurance, as provided for by Section 3700 of the Labor Code, for the performance of work for which this permit is issued. My insurance carrier and policy number are:

Carrier _____ Policy No. _____

Applicant Signature _____ Date _____

B. CERTIFICATION OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

I certify that in the performance of work for which this permit is issued, I shall not employ any person in a manner so as to become subject to the Workers' Compensation Laws of California.

Applicant Signature _____ Date _____

Notice to Applicant: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

When signed by the Environmental Health Specialist, this application shall be deemed a permit only for the work described and is not a "permit for development" as that term is used in the California Subdivision Map Act. Please note additional permits (e.g., electrical installation, waste discharge requirements, land use clearance, grading) may also be required from other agencies. **THIS PERMIT SHALL EXPIRE** upon completion of the task authorized or one year from date of issuance, whichever occurs first. No changes from the approved plan are permitted without prior written approval by Environmental Health Services. Final clearance will not be issued until all fees are paid and a copy of the drillers log is submitted to Environmental Health Services.

I hereby agree to comply with all regulations of the County of Santa Barbara pertaining to well construction, repair, modification, destruction and inactivation. The property owner, well driller, or agent will furnish Environmental Health Services a copy of a completed well log upon completion of well construction.

I certify that I have read this application and declare under penalty of perjury that the information contained herein is true, correct and complete. I hereby authorize representatives of Environmental Health Services to enter the premises for the purpose of inspecting the site and work described herein for compliance with county requirements.

REQUIRED INSPECTIONS / FINAL CLEARANCE: After permit approval, and prior to covering any components, an inspection must be scheduled directly with the approving Environmental Health Specialist at least two (2) business days in advance for:

- ✓ The sealing of the annular space on a well;
- ✓ The destruction of wells;
- ✓ Any operation stipulated on the permit to address special or unusual conditions.
- ✓ Receipt of driller's well log.

Signed _____ **Applicant (Print Name)** _____ **Applicant's Signature** _____ **Date** _____

APPLICATION DISPOSITION: **Approved** **Denied**

Signed _____ **Environmental Health Specialist** _____ **Date** _____

FOR DEPARTMENT USE ONLY

Fixed Fee Rec'd: by: _____ **Date:** _____ **Amt: \$** _____ **Credit Card Trans No:** _____ (last 4 digits)

Check No. _____ **Receipt No.** _____

Permit Conditions: _____

Final Construction Approved by: _____ **Date:** _____

Final Clearance by: _____ **Date:** _____

- Copy Required at Assessor's Office
- Copy Required at Water District Office

Water Well Application

Supplemental Information

General:

If application is for Modification to an existing well, state the nature of modification:

- Deepening Sealing of well casing
 Reperforation Replacement of well casing

Intended Well Use: *(check all that apply)*

Check the well type from the list below.

- Irrigation Irrigation and Domestic* Domestic* Only

* Indicate type of Domestic use: Single Parcel Multi-Parcel State Small Public

What is the anticipated approximate water production (acre feet per year) for the proposed well?: <2; 2-10; >10

Intended Water Use:

Do you intend to export any water off of the property? No Yes

What other water sources are available on the property? Public Private None

Site Information:

Are there other wells on the property? No Yes If yes, how many? _____

What is the parcel size of the proposed well location? _____ acres square feet

What is the Property Zoning Designation?

- AG-I AG II Residential Commercial Industrial Recreational

Is the proposed well location within the Coastal Zone? No Yes

Within what Ground Water Basin is the proposed well located? *(check the box above the appropriate column)*

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
South Coast Groundwater Basins	Santa Ynez River Watershed	North Coastal Groundwater Basins	Cuyama Groundwater Basin
<i>Carpinteria Montecito Santa Barbara Foothill Goleta</i>	<i>Santa Ynez Uplands Santa Ynez Alluvial Buellton Uplands Lompoc Groundwater Basins</i>	<i>San Antonio Santa Maria</i>	

Terms for Permit:

Initial each statement below to indicate that you understand and agree; then sign bottom of this page.

_____ I have read and understand all of the information on Page 2 of this application including, but not limited to, permit limitations.

_____ I understand that this permit is only for the well construction, modification or destruction identified on this application.

_____ I have read and understand that other permits may be required, including (but not limited to): land use; electrical; grading; waste discharge; etc.

Signed

Applicant/Owner (Print Name)
Applicant/Owner Signature
Date

Procedures for Completing a Water Well Permit Application

The attached permit application is for the construction, modification, inactivation and destruction of **water wells** as defined and regulated by the County Well Standards Ordinance. A copy of this ordinance is available from the EHS office upon request.

STEP 1 – APPLICATION

Submit a completed application for a Water Well Permit. Please fill in all the blanks. An incomplete application may result in denial or delay in processing. The application must be signed, dated, and accompanied by the proper fee at the time of submittal.

STEP 2 – PLOT PLAN

A plot plan form is provided as part of your Water Well Permit application. The top of the plot plan lists those items that must be shown on the plan. All setback distances from the proposed well site(s) need to be accurately depicted with proper measurements.

STEP 3 – SITE EVALUATION

Following the submittal of an application and fee, an Environmental Health Services representative will review the application to ensure its completeness and conduct a site inspection of the proposed water well site. Often times, due to the remote or unknown location of the intended well site, a joint inspection with the property owner or owner's agent will be necessary. If a joint inspection is not possible, the proposed well site must be conspicuously marked (i.e. with flagged stake or pole). In the event that the first proposed well site is not acceptable or utilized, the applicant may wish to designate some alternative well sites on the application plot plan. Early selection of some alternative sites allows for these sites to also be evaluated during the initial site inspection, thereby eliminating unnecessary repeat trips to the site and inefficiencies in processing the application.

STEP 4 – PERMIT ISSUANCE

Once the application and proposed well site is determined to be satisfactory, the application may be approved. When approved and signed on the reverse side by the Environmental Health Services representative, this application shall be considered a permit to perform the proposed work. Note: Wells proposed that will be located in the Coastal Zone require a Coastal Zone permit prior to approval for construction.

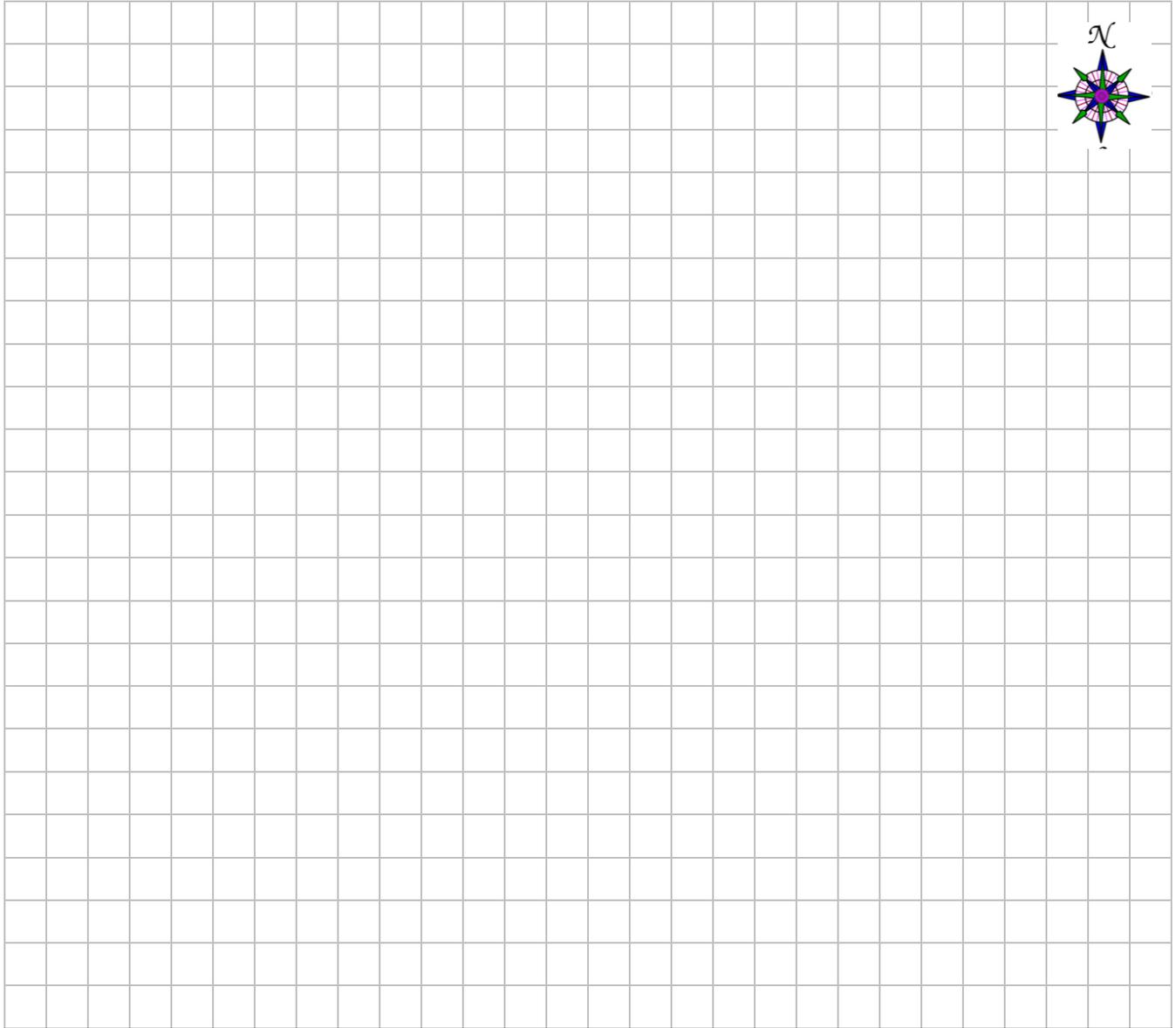
Well Permit Application Plot Plan

(Scale 1/4" Block = 20 ft.)

Permit #: _____

APN: _____

Indicate below the exact location of the proposed well with respect to the following items within 200 ft. of the proposed well: property lines, access roads and easements; existing/proposed structures (surface and subsurface); existing wells; existing/proposed industrial, hazardous, solid waste systems, works or tanks; petroleum product system works or tanks; animal enclosures and/or animal waste storage areas; agricultural operations; watercourses, 100-yr. flood plain and drainage patterns of the property; and well site elevations. Show the actual distance between the proposed well and these items.



A large grid for drawing the plot plan, with a compass rose in the top right corner. The grid is 20 blocks wide and 20 blocks high. The compass rose is a colorful star with a purple center and points in blue, green, and red, with a stylized 'N' above it.

Dept. Use Only: Site Reviewed By: _____ **Date:** _____

Sewer (Sanitary, Storm or Bldg.) – 50 ft.

Septic Tanks and / or Leachlines – 100 ft.
(include 100% expansion area)

Seepage Pit / Drywell – 150 ft.
(include 100% expansion area)

Water Bodies / Courses – 50 ft.

Underground Petroleum Product Storage Tanks – 100 ft

Other: _____



Water Well Discharge Prohibitions

----- **Fact Sheet** -----

In the autumn of 2016, unauthorized discharges from two water production wells to creeks in the Santa Barbara Coastal sub-basins resulted in consultation between the Santa Barbara County Public Health Department, Environmental Health Services Division, and the Central Coast Regional Water Quality Control Board. This consultation clarified that all discharges to creeks or drainages in the Santa Barbara coastal sub-basins are a violation of the Basin Plan.

So what does this mean to water well drillers?

- Discharges to creeks and drainages, including discharges of drilling muds, drilling waters and/or water pumped from the well while it is being developed, are prohibited;
- Such discharges are violations of county and state regulations:
 - County Code Chapter 34 Section 34A.11.(7) *Drilling waste shall be controlled and may not be discharged so as to create conditions that violate water quality control board regulations, other state laws, federal regulations or local ordinances;*
 - Water Quality Control Plan, Central Coast Basin, Chapter 5, Section IV.B. Inland Waters, reads in part: *“Waste discharges to the following inland waters are prohibited: (4). All coastal surface streams and natural drainages that flow directly to the ocean within...the Santa Barbara Coastal Subbasins...”*

Violations of these regulations may result in enforcement including issuance of a stop work order and suspension or revocation of the well permit by Environmental Health Services. Additionally, both the Water Quality Control Board and Environmental Health Services may issue notices of violation and levy fines. Violation of Santa Barbara County Code Chapter 34A may result in enforcement with an administrative fine of up to \$1,000.00 per each “one-time” action as provided in County Code Chapter 24A. The Water Quality Control Board may levy administrative fines up to \$10.00 per gallon for violation of the Basin Plan’s discharge prohibition per California Water Code Section 13385.

Water Well Drilling – Requirements Related to Hydrogen Sulfide

----- **Fact Sheet** -----

Santa Barbara County Code Chapter 34A §11. - Hydrogen sulfide detection, reporting and mitigation.

(a) The licensed well drilling contractor performing the work on a well that will exceed one thousand two hundred feet in depth shall keep a properly maintained and calibrated hydrogen sulfide H₂S gas monitor at the drill site at all times during well drilling activities. The meter shall be in operation at all times during the well drilling activities. The meter shall be calibrated per manufacturer recommendations and at least prior to each new drilling operation or after each use. A calibration log shall be maintained and kept with the meter for inspection by administrative authority on request.

(b) If hydrogen sulfide gas is detected at levels exceeding 1.0 ppm for more than ten minutes or twenty ppm instantaneously, the licensed professional shall immediately contact Environmental Health Services, the Santa Barbara County Air Pollution Control District and the California Office of Emergency Services as required by Section 2631 of Title 19 of the California Code of Regulations. If the release poses a potential threat to public health off-site or the release may violate Santa Barbara County Air Pollution Control District (APCD) Rule 310 (Odorous Organic Sulfides) or Rule 303 (Nuisance) the licensed well drilling contractor or their designee shall immediately call 911 and report the release. If the release occurs outside normal business hours, the licensed professional driller or designee shall immediately report the release to 911.

(c) Mitigation measures shall be implemented immediately if the H₂S release exceeds limits established in subsection (b) or may violate APCD Rule 310 (levels at or beyond property line of 0.06 ppm or 0.03 ppm averaged over three minutes and ten minutes, respectively) or cause detectable odors at or beyond the fenceline (APCD Rule 303). Mitigation measures must result in prompt, effective and sustained reduction of H₂S to below levels on and off the property in accordance with subsections (a) and (b).

(d) Current phone numbers for the agencies specified in subsection (b) shall be maintained on the job site and all personnel are to be trained on appropriate emergency notification procedures.

(Ord. No. 5046, 6-19-2018)