



## WELL PERMIT APPLICATION

City of Helena Community Development Department Building Division  
316 N. Park Ave. \* Room 435 \* Helena, MT 59623  
(406)447-8437 or (406)447-8438

PERMIT FEE: \$50.00      DATE: \_\_\_\_\_ PERMIT NO. \_\_\_\_\_

See "Electronic Submittal Requirements" for digital submittal guidelines. E-mail application and plan(s) to both [rowsey@helenamt.gov](mailto:rowsey@helenamt.gov) and [tdupree@helenamt.gov](mailto:tdupree@helenamt.gov).

Water wells within the City of Helena shall comply with City Code Title 3, Chapter 11 and all other applicable City Code requirements. Private well water distribution piping may not cross or be installed upon any city-owned property or right of way.

### Project Information:

Address of well: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

### Purpose of well:

Irrigation: commercial \_\_\_\_\_ residential \_\_\_\_\_ public \_\_\_\_\_ \*Other \_\_\_\_\_

Manufacturing \_\_\_\_\_ Describe Use: \_\_\_\_\_

### Site plan drawing:

Provide a scaled drawing of the property using the well. Application is incomplete without a site plan; which may be drawn by owner / surveyor / engineer? (Indicate which one).

- Show lot size and existing structures with dimensional references.
- Show location of well, well equipment, and well water distribution piping. Note: No piping of irrigation well equipment shall enter a structure. Manufacturing uses shall provide backflow protection.
- Show all utilities locations for the property, including but not limited to: water, sewer, gas lines, electrical, telephone, television, and storm water. Label all lines and sizes as determined from the One Call Utility Locate Program (811) for site evaluation.

### Well Driller Information:

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

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has or will commence prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in the City of Helena.

APPLICANT AFFIDAVIT: I certify that all the foregoing information is accurate. Signature below indicates acceptance of financial responsibility for plan check fees and postage expenses associated with plan review. Plans will not be reviewed without signature.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by city staff following review of submitted plans and during the field inspection of the well installation and its electrical service (separate permit required).**

**Plan review:**

According to the plan(s) and application provided, confirm the following:

\_\_\_\_\_ 1) Well use conforms to that as stated above? (\* If Other is marked and described as sole source of domestic water serving newly annexed property, refer to City Ordinance Section 3-11-8 for additional criteria on water testing, well size modifications and approval conditioned upon reasonable service distance from available city system. (Verify with Public Works, Engineering and Utility Division)

\_\_\_\_\_ 2) Location of well does not conflict with known utilities as established by the One Call Locate System and all utilities as called out above are accounted for?

\_\_\_\_\_ 3) Does plan indicate any well piping into the structure(s) served? (If so, a backflow prevention device and possible expansion tank are required on the city supplied domestic water system).

**Field inspection:**

After the completion of the well drilling, confirm the following:

\_\_\_\_\_ 1) Well drilled at location indicated on the plan? (If no, note differences below).

\_\_\_\_\_

\_\_\_\_\_ 2) Drilling by-products confined on site? (If not, and *billable* cleanup required, note where and advise the Streets Division).

\_\_\_\_\_ 3a) Was well piped into the structure(s)?

\_\_\_\_\_ b) Was any cross-connection evident?

\_\_\_\_\_ c) Was backflow device \_\_\_\_\_ and expansion tank \_\_\_\_\_ installed?

\_\_\_\_\_ d) Was there an available floor drain, if a basement installation?

\_\_\_\_\_ 4) Well electrical permit obtained and onsite?    **Yes**    **No**

**Inspector:** \_\_\_\_\_ **Date:** \_\_\_\_\_