

APPLICATION

Drinking Water and Groundwater Protection Division

APPLICATION FOR RENEWAL VERMONT WELL DRILLER'S LICENSE

1. NAME AND ADDRESS

	(Name, First, Int. Last)
	(Chrock address)
	(Street address)
	(PO Box)
	(Town/City, State, Zip)
	(Telephone Number)
	(email)
	Name of business applicant is or will be associated with:
	Applicant's status with business (i.e., owner, employee, qualifying individual)
All BE	information requested on this application form must be complete or the application will be returned. ANSWERS MUST NEATLY PRINTED IN INK OR TYPED.
2.	FEE: Attach nonrefundable check or money order made payable to State of Vermont for \$1(\$ to be billed annually. All outstanding fees must be paid.
3.	TYPE OF LICENSE:
4.	QUALIFYING INDIVIDUAL for a Company?: (check one)

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5. OUALIFYING INDIVIDUAL AGREEMENT - ROLES AND RESPONSIBILITIES

A sole proprietor is not required to complete sections 5 and 6. If the owner, partner or other person with delegating authority for the firm will also be the Qualifying Individual, sign 5B only.

A licensed well driller shall be the qualifying individual for only one business, governmental, or other entity. A business, governmental, or other entity may have more than one qualifying individual. No business, governmental or other entity engaged in the business of well drilling shall drill or close abandoned wells without a qualifying individual overseeing and taking responsibility for the daily drilling operations. The qualifying individual:

- (a) shall be a licensed well driller and an owner, partner, corporate officer or employee for a business, governmental or other entity engaged in the business of well drilling;
- (b) shall be directly in charge of the daily well drilling operations and assure that all wells meet the appropriate construction and closure standards;
- (c) shall review all Well Completion Reports and ensure all reports are complete, accurate and filed within 90 days of well completion;
- (d) shall ensure all wells are tagged within 30 days of completion;

partner, etc.) for the firm

A) I,

- (e) shall keep complete and accurate records of all wells attempted, drilled, and closed;
- (f) shall notify the Department of any change in information provided on his or her application;
- (g) shall promptly respond to and investigate, where appropriate, client complaints and notify the Department of suspected public health or environmental threats, if encountered;
- (h) shall keep abreast of changes in industry technology, state, federal and safety regulations regarding well drilling practices; and

_____ (name) as_____

(owner,

(firm name) hereby grant and delegate

(i) shall have oversight responsibility for work conducted by a well drilling subcontractor.

D. Name. Address, and phone number of Company contact, other than yourself:

	the roles and responsibilities stated in (a) - (i) above to	(applica	nts
	name) and designate him/her the Qualifying Individual for this Signature	s firm (business, governmental or other entity)Date	
B)	I, (app Vermont accept the roles and responsibilities stated in (a) - (i) of business, governmental or other entity)	plicants name) as a licensed well driller in the State above as the Qualifying Individual for this firm (nar	of ne
Signature:		Date:	
	 6. BUSINESS INFORMATION A. Name of Business: B. Your company must be registered with the Vermont Secret Yes No C. Name and Address of Vermont Registered Agent: 	etary of State. Is your company registered?	
	C. Name and Address of Vermont Registered Agent.		

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Date	Description (Title of event, sponsor, location, hours)	
te: If	you have not completed this requirement, please explain:	
DRII	LLING MACHINES: List the type and number of rigs currently	in use under this license in Vermon
	Type (i.e., air rotary)	AL I
		L
DRIL	LING RECORD:	
A.	Number of wells completed, attempted, or supervised in Verr	
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В.	Number of wells completed, attempted, or supervised in Verr this license. Note: if you indicated "0", go to Section 10 ———————————————————————————————————	oorts for the wells referred to in 9.A r Licensing Rules?
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7. CONTINUING EDUCATION

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The Vermont Department of Environmental Conservation (DEC) as a licensing authority is responsible for ensuring applicants for new and renewal license certify as to their status with regard to child support, taxes, unemployment compensation and unpaid judgments.	
CHILD SUPPORT: Child Support Orders (15 V.S.A. §795) as of the date of this application: (you must check one) I am not subject to a child support order; OR I am subject to a child support order and am in good standing* or in full compliance with a plan to pay I am not in good standing* or in full compliance with a plan to pay.**	
TAXES: Tax Compliance (32 V.S.A. §3113(b)) as of the date of this application: (you must check one) I have never lived or worked in Vermont and do not owe Vermont taxes; OR No taxes are due and payable and all required returns have been filed; OR The liability for any taxes due and payable is on appeal; OR I am in compliance with a payment plan approved by the Vermont Department of Taxes; OR I am not in good standing* or in full compliance with a plan to pay.**	
UNEMPLOYMENT COMPENSATION: Unemployment Compensation (21 V.S.A. §1378(b)) as of the date of this application: (you must check one) This does not apply to me because I am not now, nor have I ever been an employer in Vermont; OR No contribution or payments in lieu of contributions are due and payable; or the liability for any contributions or payments in lieu of contributions due and payable is on appeal; or the employing unit is in compliance with a payment plan approved by the commissioner; OR I am not in good standing* or in full compliance with a plan to pay.**	
DISTRICT COURT FINES / JUDICIAL BUREAU: Unpaid judgments (4 V.S.A. §1110(c)) as of the date of this application: (you must check one) I do not have any unpaid judgments I am in good standing* with respect to any unpaid judgment issued by the judicial bureau or district court for fines or penalties for a violation or criminal offense I am not in good standing.*	
 * "Good standing" is defined by various laws cited above. For more information, refer to the statute. ** You may request a finding that requiring immediate payment would impose an unreasonable hardship. 	
11. AFFIDAVIT I certify that all information contained in this application is true and accurate to the best of my knowledge maximum penalty for perjury is fifteen years in prison, a \$10,000 fine, or both. (13 V.S.A. §2901)	. The
Signature of Applicant Date of Application	

10.

Printed Name of Applicant

STATEMENT OF APPLICANT

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Applicant Date of Birth

OFFICIAL USE ONLY			
License Number			
Date Received			
Fee Paid			
Outstanding Fees Paid			
Date Reviewed			
Incomplete			
Corrected and App			
Complete			
Hold – Spec. Action			
License App. and Issued			
Number of Seals Sent	·		

This (fact sheet/form/application) and related environmental information are available electronically via the internet. For information visit us through the Vermont Homepage at http://www.vermont.gov or visit directly at http://www.vermontdrinkingwater.org

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1 National Life Drive, Main, 2nd Floor
Montpelier, VT 05620-3521
Toll free 1-800-823-6500
Out of State 1-802-241-3400
Fax 1-802-828-1541

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