

**Vermont Department of Environmental Conservation
Drinking Water and Groundwater Division***Agency of Natural Resources*

1 National Drive [phone] 802-241-3400
Main Bldg, 2nd Floor [in-state] 800-823-6500
Montpelier, VT 05620-3521 [fax] 802-828-1541
www.vermontdrinkingwater.org

1 July 2012

To: Well Driller License Applicant

Re: Drillers License Application Package

Thank you for your interest in obtaining a Vermont Well Driller License. Licenses are issued to individuals engaged in the business of well drilling – water and monitoring – or closing abandoned wells. Any business, governmental or other legal entity engaged in the business of well drilling or closing abandoned wells must have a licensed Driller as a qualifying individual.

The requirements for licensing are as follows:

1. Complete and submit the enclosed application; choose the class of license being applied for: water, monitoring or both;
2. Pay the required fee; annual fee of \$140. Make check payable to the State of Vermont. The fee is the same if applying for one or both classes of license. If you are adding a class to an existing license prior to license renewal, one time fee of \$140 is required;
3. Meet the educational and experience requirements set forth in section 15-504 of the Well Driller Licensing Rule, summarized below;
 - (a)
 - (1) For a water well driller: document participation in the drilling of at least the five most recent wells and provide the Well Completion Reports, if available; or
 - (2) For a monitoring well driller: document participation in and provide a description of the most recent five projects and provide the Well Completion Reports, if available.
 - (b) Document at least 36 months of well installation experience or document 24 months of well installation experience with a minimum of a two year degree in an engineering, environmental science, well drilling or related degree. Documented experience as an apprentice to a licensed well driller will also be considered on a month for a month basis toward the 24 or 36 months.
 - (c) Document the principal types of drilling methods, experience, and equipment with which the applicant has proficiency.

4. Obtain a passing grade (70%) on the Vermont Licensing Test and the National Ground Water Association (NGWA) or equivalent tests as determined by the Commissioner related to each license class. You must take the NGWA General Test and a specialty test – on the drilling technology you will be using – for each class of license being applied for. If requested by the applicant, the licensing test may be taken orally. If an applicant for a well driller's license does not pass the written test, the applicant may be retested by appointment after 30 days. The applicant must receive a passing grade on all tests within a year of passing the first test, or all tests will have to be retaken. All tests are administered by appointment with the Vermont Water Supply Division;
5. Identify the name of the business the applicant is or will be associated with and the applicant's status (i.e. owner, partner, employee, qualifying individual);
6. If designated as a qualifying individual, complete the Qualifying Individual Agreement on the License Application Form; and
7. Satisfy all other state mandated requirements for licensing, including but not limited to, signing child support and tax statements and registration with the Secretary of State.

If you have any questions, please contact myself or Scott Stewart at the address above, 1-800-823-6500 (in-State), 1-802-241-3400.

Sincerely,

Dennis Nealon,
Hydrogeologist

Enc. Application for a Well Driller License.

Drinking Water and Groundwater Protection Division

1 National Life Drive
Main Building, 2nd Floor
Montpelier, VT 05620-3521
TELEPHONE (802) 241-3400
FACSIMILE (802) 828-1541

APPLICATION FOR A WELL DRILLER LICENSE

Please complete application, and include the
annual fee of \$140.00 - payable to: _____
— State of Vermont.

Department of Environmental Conservation
Drinking Water and Groundwater Protection Div.
1 National Life Drive, Main Bldg., 2nd Floor
Montpelier, VT 05620-3521
Phone No: (802) 241-3412 / (800) 823-6500 (VT)

DO NOT WRITE IN THIS SPACE

Received: _____
Fee Paid: _____
Date Reviewed: _____
Incomplete: _____
Rcd Correction: _____
License Approved: _____
License Number: _____
Process Time: _____

1. Class of License: ☐ Water Well ☐ Monitor Well ☐ Water & Monitor Wells
(check box (es))

2. Applicants Name _____
(First) (Middle Initial) (Last)
Mailing Address _____
(Street Address)

(Town or City) (State) (Zip)

Phone Number: _____ Email: _____

3. Name of Firm, Trade Name or Legal Entity: _____

Office Address _____
(Street)

(Town or City) (State) (Zip)

Phone Number: _____ Email: _____

4. Number and type of rigs owned _____
Use additional sheet of paper if necessary
5. You must be registered with the Vermont Secretary of State. Is your business, government or other legal entity registered with the Vermont Secretary of State: **Yes or No**
(circle one)
6. Are you the Qualifying Individual for the company: **Yes or No**
If Yes, please complete and sign the attached Qualifying Individual Agreement: (Circle one)

7. WORK EXPERIENCE:

Describe below all work experience in well drilling. Use additional sheets of paper if necessary.

- A. Present or most recent employment
Name of Firm: _____
Address: _____
Job title: _____ Supervisor: _____
Dates of Employment From: _____ To _____
Full-time: Yes or No; if part-time or seasonal, Hours/Week or Month
- Summary of your duties and responsibilities, type of equipment used, type and number of wells drilled: _____

- B. Next most recent employment
Name of Firm: _____
Address: _____
Job title: _____ Supervisor: _____
Dates of Employment From: _____ To _____
Full-time: Yes or No; if part-time or seasonal, Hours/Week or Month
- Summary of your duties and responsibilities, type of equipment used, type and number of wells drilled: _____

- C. Next most recent employment
Name of Firm: _____
Address: _____
Job title: _____ Supervisor: _____
Dates of Employment From: _____ To _____
Full-time: Yes or No; if part-time or seasonal, Hours/Week or Month

Summary of your duties and responsibilities, type of equipment used, type and number of wells drilled:

7. PROJECT EXPERIENCE:

A. Water Well Driller: List name, address and phone # of owners for at least five of the most recent water wells you have drilled (attach Well Completion Reports).

Name	Address	Phone #	Date Drilled

B. Monitoring Well Driller: List name, address and phone # of client for at least five of the most recent projects you have drilled monitoring wells (attach Well Completion Reports).

Name	Address	Phone #	Date Drilled

8. EDUCATION INFORMATION:

List any educational information, apprenticeship information, other licenses, special courses, certification numbers, etc. which could help the Department to determine your qualifications for a license.

9. Vermont Well Driller's Licensing Test.

Date Taken _____ Score _____

11. National Ground Water Association Certification General Test.

Date Taken _____ Score _____

12. List date taken and score of National Ground Water Association Specialty Test(s) and identify test(s).

	Test	Date Taken	Score
1.			
2.			
3.			
4.			

13. Statement of Applicant

The Vermont Department of Environmental Conservation (DEC) as a licensing authority is responsible for ensuring that 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.

14. AFFIDAVIT:

I certify that all information contained in this application is true and accurate to the best of my knowledge. The maximum penalty for perjury is fifteen years in prison, a \$10,000 fine, or both. (13 V.S.A. §2901)

Signature of Applicant

Date of Application

Printed Name of Applicant

Applicant Date of Birth

15. NOTARY:

Please have notary stamp the completed application and print name and expiration date of stamp.

Notary Name _____ Exp. Date _____

Signature _____

This guidance sheet and related environmental information are available electronically at:
<http://dec.vermont.gov/water>

Drinking Water and Groundwater Protection Division
1 National Life Drive, Main 2
Montpelier, VT 05620-3521
Phone: 802-828-1535
Fax: 802-828-1541

Vermont Well Driller

Qualifying Individual Agreement - Roles and Responsibilities

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

A licensed well driller shall be the qualifying individual for only one business, governmental, or other legal entity. A business, governmental, or other entity may have more than one qualifying individual. No legal 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;
- (e) shall keep complete and accurate records of all wells attempted, drilled, and closed for a minimum of six years;
- (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
- (i) shall have oversight responsibility for work conducted by a well drilling subcontractor.

A) I, _____ (name) as _____
(owner, partner, etc.) for the firm _____ (firm name) hereby grant and
delegate the roles and responsibilities stated in (a) - (i) above to _____
(applicant's name) and designate him/her the Qualifying Individual for this firm (business, governmental or
other legal entity). Signature _____ Date _____

B) I, _____ (applicant's name) as a licensed well driller in the State
of Vermont accept the roles and responsibilities stated in (a) - (i) above as the Qualifying Individual for the firm
(name of business, governmental or other legal entity) _____.

Signature _____ Date _____