VERMONT
ENVIRONMENTAL CONSERVATION

APPLICATION

Drinking Water and Groundwater Protection Division

APPLICATION FOR RENEWAL
VERMONT WELL DRILLER'S LICENSE

1. NAME AND ADDRESS

(Name, First, Int. Last)
(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 information requested on this application form must be complete or the application will be returned. ANSWERS MUST BE NEATLY PRINTED IN INK OR TYPED.

2. **FEE:** Attach nonrefundable check or money order made payable to **State of Vermont** for $140 to be billed annually. All outstanding fees must be paid.

3. **TYPE OF LICENSE:** ☐ Water Wells ☐ Monitoring Wells ☐ Both

4. **QUALIFYING INDIVIDUAL for a Company?:** (check one) ☐ **Yes** ☐ **No**
If yes, complete Sections 5 and 6.
If no, go to Section 7.

5. QUALIFYING 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;

(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

(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 _____ (applicants name) and designate him/her the Qualifying Individual for this firm (business, governmental or other entity) _____. Signature_____Date _____

B) I,_____ (applicants 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 this firm (name of business, governmental or other entity)_____ .

Signature:_____ Date:_____ .

6. BUSINESS INFORMATION

A. Name of Business:
B. Your company must be registered with the Vermont Secretary of State. Is your company registered? ☐ Yes ☐ No
C. Name and Address of Vermont Registered Agent:
D. Name. Address, and phone number of Company contact, other than yourself:

7. CONTINUING EDUCATION

Please list at least eight hours of education or training activity attended within the last 3 years. (Use additional pages if necessary.)

Date	Description (Title of event, sponsor, location, hours)

Note: If you have not completed this requirement, please explain:

8. DRILLING MACHINES: List the type and number of rigs currently in use under this license in Vermont:

Type (i.e., air rotary)	Number

DRILLING RECORD:

A. Number of wells completed, attempted, or supervised in Vermont **within the last three years** under this license. **Note: if you indicated "0", go to Section 10 below.**

_____

B. ☐ **Yes** ☐ **No** (check one) Have all Well Completion Reports for the wells referred to in 9.A been filed as required by § 15-701 and § 15-702 of the Well Driller Licensing Rules?

If **NO**, please explain: (Use additional pages if necessary.)

C. ☐ **Yes** ☐ **No** (check one) Have all wells referred to in 9.A been tagged, except those wells for which the casing has been removed as required by § 15-704 of the Well Driller Licensing Rule, and by Appendix 12.3.9 of the Water Supply Rules?

If **NO**, please explain: (Use additional pages if necessary.)

10. 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.

11. 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

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 application and related environmental information are available electronically
at: www.dec.vermont.gov/water

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