Request for permit Individual Work for Harnessing Underground Water

Permit no.	
1 Office 110.	
Identification no. of the well	
Municipality no. Year Sequence	
1. Nature of the request (permit) for 20 people and less	
Tapping of a sealed tubular well	—
	-11 -
Installation of a sealed surface well Obturation (sealing) of unused w	/ell \Box
Others	
2. Identification of the requester	
Name: Registration no	
Name:	
Address Date:	
3. Location	
Lot noRoadTownship	
(m) Denth (m) Area	(m^2)
Separate Lot: Yes No Width Depth (m) Area	
Zoning: White Zone Green (agricultural) Zone Authorized Zone Declared Zone	
이 맛이 있다. 그리 아무슨 아들에게 하면 어떻게 하면 살이 하는데 하는데 아무슨 아무리	
Flooded Zone: Yes No Municipal: Zone no.	
Flooded Zone: Yes No Withhelpan Zene	
4. Work Executant (Performer)	
T' antroctor	
Owner or work provider Licenced contractor Installer of drilling equipment	
well diffier	
Others (specify)	
Telephone no.:	
Name:Fax no.:	
Name: Fax no.: Licence no. R.B.Q	
Postal Code: Business no NEQ	
Dubinious at the	

5. Location of Drilling
Civic Address:
Municipality:
Lot:
Road:
Land Registry:
6. Location Plan
The location plan has to show where the drilling (tapping) work will take place in relation to all used water systems, sealed and none sealed, including the ones of the neighbours
If there are plots of land being used for culture, mark the distance between these plots and were the work will be done.
LOCATION PLAN
[사람들] [[[[[[[[[[[[[[[[[[[
7.
UTM Coordination Zone:
Longitude – Latitude Longitude X:
Longitude – Latitude Longtitude X: Latitude Y: Daily maximum volume projected(m ²)
Dany management of the property of the propert
Optional information: NAD27 NAD83

8.	Declaration	by	the owner	or	his/her	authorized	representative	
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I hereby declare that the information given herewith are exacts and that if I am allocated a permit, I will conformed to the disposition of the municipal and provincial regulations in accordance with the rules on underground water harnessing (Q-2, r 1.3)

Signature:	Date:			
9. For use by municipality	10. Inspection Report			
☐ Request approved on: ☐ Request refused on: Permit duration period:	Comments:			
Cost of permit:	Date:			
Signature:Municipal Representative	Signature: Inspector			