

FREEHOLD AREA
HEALTH DEPARTMENT

SERVING
FREEHOLD TOWNSHIP ** FREEHOLD BOROUGH
****WALL TOWNSHIP****

1 MUNICIPAL PLAZA
FREEHOLD, NEW JERSEY 07728-3099

TELEPHONE: 732-294-2060
FAX: 732-462-2340

TOWNSHIP _____ BLOCK _____ LOT _____ PERMIT FEE _____

NEW DOMESTIC WELL

REPLACEMENT DOMESTIC WELL

Note: Irrigation wells do not require a local permit. If an existing well is to be abandoned the Health Department shall be sent the abandonment report.

PERMIT FEES: FREEHOLD TOWNSHIP & WALL TOWNSHIP- \$50.00
FREEHOLD BOROUGH – NO FEE

CLIENT NAME (PROPERTY OWNER): _____

OWNER: ADDRESS AND TELEPHONE NUMBER: _____

NJ STATE: PERMIT NUMBER: _____ DATE ISSUED: _____

NAME, ADDRESS & PHONE# WELL DRILLER: _____

LOCATION OF PROPERTY: _____

TYPE OF WELL OR WATER SUPPLY: _____

ESTIMATED DEPTH: _____ METHOD OF SEALING: _____

PUMPING EQUIPMENT: _____

STORAGE FACILITIES: _____

TREATMENT DEVICES: _____

IF THIS WELL IS TO BE INSTALLED ON A PROPERTY WHERE A PUBLIC WATER SUPPLY IS ALSO BEING UTILIZED, ALL WELL PUMPS, PIPES, TANKS AND OTHER EQUIPMENT MUST BE LOCATED OUTSIDE THE DWELLING UNIT.

COPIES OF ALL SUCH PERMITS MUST BE FILED WITH THE WATER DEPARTMENT