## SMITHFIELD TOWNSHIP WELL DRILLING PERMIT APPLICATION

Code Enforcement Officer: Ed Habbershon- 814-643-0567.

(\$25.00 Fee)

Name & address of applicant:		t
Phone #: Home:		Office:
Name & address of property owner:		
Phone #: Home:	Cell:	Office:
Parcel No. of site well is to be dug or	n #:	Location of property:
Who is doing the work: property ow Contractors' Name & Address:		
Phone #: Office:		Cell #:
Name of contact person doing the wo	ork:	
allow the Township to understand the	e location of the	

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Applicants signature:	Date submitted to Twp.:	
All applicants MUST submit the following with this appl	ication:	
1. A Site Plan of the project, showing exact location of the value from all buildings and property lines. You may subn		
2. A \$25.00 fee must accompany this application at time of	submission.	
<b>Emergency Situation Information:</b>		
If the well for which this permit is requested was already dril following:	lled due to an emergency, please provide the	
1. Date well was drilled:		
2. Brief description of the emergency:		
	·	
· .		
3. Date project was completed on.	<del></del>	
FOR OFFICE USI	E ONLY	
Date Code Enforcement Officer inspected the site.		
2. CEO comments on inspection:		
3. CEO recommendation to Twp. Supervisors: approve		
Comments:		

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 Date Superviso	ors reviewed application:		,
•		was approve	or disapprove
Reason for disa	pproval:		