



SECTION A. SITE NAME AND LOCATION

Site Name: _____
List all AKAs: _____
Street Address: _____
Municipality: _____ (Township, Borough or City)
County: _____ Zip Code: _____
Program Interest (PI) Number(s): _____ Case Tracking Number(s): _____

SECTION B. WELL OWNER AND LOCATION

1. Name of Well Owner _____
2. Well Location (Street Address) _____
3. Well Location (Municipal Block and Lot) Block# _____ Lot # _____

SECTION C. WELL LOCATION SPECIFICS

1. Well Permit Number (This number must be permanently affixed to the well casing): _____
2. Site Well Number (As shown on application or plans): _____
3. Geographic Coordinate NAD 83 to nearest 1/100 of a second:
Latitude: North _____ Longitude: West _____
4. New Jersey State Plane Coordinates NAD 83 datum, US survey feet units, to nearest foot:
North _____ East _____
5. Elevation of Top of Inner Casing (cap off) at reference mark (nearest 0.01'): _____
Elevation Top of Outer casing: _____ Elevation of ground: _____
Check one: NAVD 88 NVGD29 On Site Datum Other
6. Source of elevation datum (benchmark, number/description and elevation/datum). If an on-site datum is used, identify here, assume datum of 100', and give approximated actual elevation (referencing NAVD 88).
7. Significant observations and notes:

SECTION D. LAND SURVEYOR'S CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

SEAL

Professional Land Surveyor's Signature: _____ Date _____
Surveyor's Name: _____ License Number: _____
Firm Name: _____ Certificate of Authorization #: _____
Mailing Address _____
City/Town: _____ State _____ Zip Code: _____
Phone Number _____ Ext.: _____ Fax: _____