

**MID GSA - CITY OF MADERA GSA - MWD GSA  
DOMESTIC WELL MITIGATION PROGRAM (DWMP)**

**INITIAL WELL ASSESSMENT FORM**

**This form must be completed within 45 calendar days prior to application submittal date.**

LANDOWNER INFORMATION																			
Last Name:	First Name:	Middle:																	
Mailing Address:		City:	State: CA	ZIP:															
Property Address:		City:	State: CA	ZIP:															
Phone:	Secondary Phone:																		
E-mail Address:																			
Parcel Number:	Do you live on Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Occupants in Home:																	
Driller Name: _____  Driller Phone Number: _____  Driller on "Pre-Approved Driller List" <input type="checkbox"/> Yes <input type="checkbox"/> No, Does Not Qualify for DWMP  Initial Well Assessment Completed: _____ (Date) <input type="checkbox"/> Drillers Log (attach) <input type="checkbox"/> Video Log (attach) Dates: _____, _____ (mm.yy) <input type="checkbox"/> Site Photos (attach) <input type="checkbox"/> Well Design Documentation (attach)			Well Info: Date Issue Arose: _____  Casing Material: _____  Casing Diameter: _____ in Depth to Bottom: _____																
Well Driller certifies the well is <b><u>ONLY</u></b> dry due to declining water levels. <input type="checkbox"/> Yes <input type="checkbox"/> No																			
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">_____</td> <td style="width: 33%; border: none;">_____</td> <td style="width: 33%; border: none;">_____</td> </tr> <tr> <td style="border: none;">Landowner Signature</td> <td style="border: none;">Print Name</td> <td style="border: none;">Date</td> </tr> <tr> <td colspan="3" style="border: none; height: 10px;"> </td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">Well Driller Signature</td> <td style="border: none;">Print Name</td> <td style="border: none;">Date</td> </tr> </table>					_____	_____	_____	Landowner Signature	Print Name	Date				_____	_____	_____	Well Driller Signature	Print Name	Date
_____	_____	_____																	
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_____	_____	_____																	
Well Driller Signature	Print Name	Date																	