

Rev 3/08  ST/CO USE ONLY DATE RECEIVED  MM DD YY ____ _	DATE OF PUMP INSTALLATION  MM DD YY ____ _	<b>STATE OF WEST VIRGINIA WATER WELL PUMP INSTALLATION REPORT</b>	<b>FORM SW-262</b> THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER INSTALLATION IS COMPLETED
	WATER WELL PERMIT NO.  DW-		FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

**PUMP INSTALLATION LOCATION**

**Owner:** LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

STREET/ROAD \_\_\_\_\_ COUNTY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**AREA NAME/LOCATION:** \_\_\_\_\_

**WATER SYSTEM USE:**  Potable  Public Water Supply  
 Geothermal  Industrial  Commercial  Dewatering  
 Irrigation  Test/Exploratory  Other \_\_\_\_\_

<p><b>PUMPING EQUIPMENT</b></p> <p>Type Pump: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet  <input type="checkbox"/> Other (specify) _____</p> <p>Pump Manufacturer: _____  Pump Model: _____</p>	<p><b>INSTALLATION DETAILS (CONT.)</b></p> <p>Pitless: <input type="checkbox"/> Pitless Adapter <input type="checkbox"/> Pitless Unit  Pitless Manufacturer: _____  Pitless Model: _____  Method of Cutting Hole in Casing for  Pitless: _____  Storage Tank Model: _____  Check Valves Locations: _____  Well Disinfected: <input type="checkbox"/> Yes <input type="checkbox"/> No  By Whom: _____</p>
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**INSTALLATION DETAILS**

Well Diameter \_\_\_\_\_ inches  
Well Depth \_\_\_\_\_ (Ft)  
Static Water Level (from surface): \_\_\_\_\_ (Ft.)  
Depth of pump: \_\_\_\_\_ (Ft.)  
Riser Pipe: Material \_\_\_\_\_  
Pressure Rating \_\_\_\_\_ (psi)

**COMMENTS BY INSTALLER**

  
  
  
  
  
  
  
  
  
  

I hereby certify that this well has been constructed in accordance with state rules and that the information presented herein is accurate and complete to the best of my knowledge.

**Pump Equipment Installed by :**

Property Owner Name (Print) \_\_\_\_\_ Owner Signature \_\_\_\_\_  
Pump Installation Test Passed on \_\_\_\_/\_\_\_\_/\_\_\_\_

Company Name \_\_\_\_\_ WV Contractor No. \_\_\_\_\_ Business Franchise Number \_\_\_\_\_  
Master Well Driller Certification No. \_\_\_\_\_ or Pump Installer Certification No. \_\_\_\_\_  
Master Well Driller (print) \_\_\_\_\_ Master Well Driller Signature \_\_\_\_\_  
Pump Installer ( print) \_\_\_\_\_ Pump Installer Signature \_\_\_\_\_

**SITE SUPERVISOR (SIGNATURE OF DRILLER OR JOURNEYMAN RESPONSIBLE FOR SITEWORK IF DIFFERENT FROM MASTER DRILLER.**

Journeyman Well Driller Certification No. \_\_\_\_\_  
Journeyman Well Driller (please print) \_\_\_\_\_

Apprentice Name(s) \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_