



County of Yolo

DEPARTMENT OF COMMUNITY SERVICES

Environmental Health Division

292 W. Beamer Street, Woodland, CA 95695

PHONE - (530) 666-8646 FAX - (530) 669-1448

WELL DRILLER'S AUTHORIZATION LETTER

| | | | | | |
|----------------------|--|-------------|--|-----------|--|
| Site Address: | | City/State: | | Zip Code: | |
| Drilling Company: | | | | | |
| Driller's Address: | | | | | |
| Driller's Phone No.: | | | | | |
| C-57 License No.: | | Exp. Date: | | | |

For the sole purpose of procuring permits for the construction, modification, repair, or destruction of wells or soil borings and the installation, repair, or replacement of well pumps at the aforementioned site, I hereby designate the following entity(ies) to act as my authorized representative:

| Authorized Representative | | | | | |
|---------------------------|--|-------------|--|-----------|--|
| Name(s): | | | | | |
| Company: | | | | | |
| Address: | | City/State: | | Zip Code: | |

I understand that as the applicant for permits for activities regulated under Chapter 8 of the Yolo County Code, I am responsible for compliance with all provisions of that Chapter. I further understand that upon written notification to Yolo County Environmental Health, I may rescind this authorization.

| Driller's Authorization | |
|-------------------------|--|
| Signature: | |
| Printed Name: | |
| Title: | |
| Date: | |