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Receipt # _____
Approval List _____

STATE OF UTAH

Department of Natural Resources

Division of Water Rights



APPLICATION FOR PUMP INSTALLER LICENSE For the Year _____



*Do not fill out this form until you have read and understand the most recent version of the **State of Utah Administrative Rules for Well Drillers** and other reference materials found in the Pump Installer Licensing Packet. Make checks payable to Utah Division of Water Rights. Send application to: Utah Division of Water Rights, PO Box 146300, SLC UT 84114-6300*

Application, with an initial statutory \$200 filing fee for consideration of the issuance of a Utah Pump Installer License, is hereby filed with the Office of the State Engineer to engage in the practice of cleaning, developing, testing, and pump installation/repair work on wells for the purpose of utilizing or monitoring underground water in accordance with Utah Code § 73-3-25 Annotated 1953, as amended.

Name	Company Name:
Mailing Address:	City/State ZIP Code:
Business Phone:	Residence Phone:
Cell Phone:	FAX Number:
Date of Birth:	E-Mail Address
Utah Well Drilling Operator Registration Number (if applicable)	

Applicant proposes to perform cleaning, development, testing, and pump installation/repair work on the following well types or perform regulated activities as a licensed Pump Installer (Check all that apply):

Domestic/Stock	Monitor	Cathodic Protection	Clean/Renovate
Municipal	Public Supply	Irrigation	Piezometer
Test Well	Well Development	Industrial	Tunnel/Horizontal Well
Injection	Heat Pump	Dewatering	Pump Testing
Other:			_____

RECORD OF RELEVANT EXPERIENCE

Describe your pump installation experience in the table below. Use the back of this page if additional room is necessary to describe experience.

Pump Rig Type	Number of Pumps Installed	Total Hours as Apprentice (Helper)	Total Hours as Operator	Hours as Foreman or Licensee	Total Years/Months Experience

Describe other relevant experience, training, and responsibilities relative to well design, cleaning, and pump installation/repair. List licenses and certifications from other states. Attach letters of reference and/or training certifications, if available. (Use back of page if needed)

Describe any pump-related classroom study or course work you have completed (documentation of course work must be attached to application).

School/Class Attended

Hours Completed Credits Received

Date

References: List the name and address of three (3) persons who can attest to your understanding and experience related to pump installation and repair. By signing this application, the applicant gives the State Engineer's Office permission to contact the listed references.

1. _____

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3. _____

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List the type, make, and model of drilling/pump rig(s) that you intend to use as a licensed pump installer in the State of Utah.

Do you have down-hole well video inspection equipment? Yes or No

AFFIDAVIT

STATE OF _____)
)
COUNTY OF _____)

The undersigned, being first duly sworn deposes and states that the information he/she has provided in this Utah Pump Installer License Application as outlined above is true and correct. The undersigned further states that he/she is familiar with the State of Utah Administrative Rules for Water Well Drillers (Utah Admin. Code R655-4) and will follow the well drilling administrative requirements and minimum construction standards, as promulgated.

Applicant Signature

Date

Subscribed and sworn before me this _____ day of _____, 20 _____.

Notary Public

Seal (Commission Expires)