

FAX TO: JEFFERSON COUNTY ENVIRONMENTAL HEALTH DIVISION

FAX #: (360) 379-4487

FAX FROM: _____

FAX #: _____

DRILLER NOTIFICATION FORM

DRILLER NAME _____

PROPERTY OWNER _____

USR CASE # _____ PARCEL # _____

SITE LOCATION _____

DIRECTIONS TO SITE (IF NO ADDRESS AT THE SITE)

Please include reference to the nearest address if possible.

APPROXIMATE DATE AND TIME OF START _____

TYPE OF RIG DRILLING THE WELL _____

CONTACT PHONE # _____