

Type

Docs

Plans

WE100-0120

Building Permit Number

1201

Street Number

Burbank Ave

Street Name

Community Code

APN

COUNTY OF SONOMA
 PERMIT & RESOURCE MANAGEMENT DEPARTMENT
 WELL & SEPTIC SECTION
 2550 VENTURA AVENUE
 SANTA ROSA, 95403
 (707) 565-1900

APPLICATION FOR PERMIT
 WATER WELL

WELL ADDRESS 201 Burbank Ave.
 CITY Santa Rosa, CA ZIP 95407
 PROPERTY OWNER Fedco Construction
 ADDRESS 3510 Brooks Ave.
 DRILLING CONTRACTOR Nutting & Jensen
 ADDRESS 1924 Gravenstein Hwy. So. Seb.

APPLICATION No Well 08-0120
 ASSESSOR'S PARCEL No 125-201-043
 PHONE No 586-0500
 CONTRACTOR LICENSE No 340854
 PHONE No 823-8008

TYPE OF WORK:	Class I Permit <input type="checkbox"/>	Class II Permit <input type="checkbox"/>	New Well <input type="checkbox"/>	Reconstruct Observation <input type="checkbox"/>	Test well, Test hole <input type="checkbox"/>	Destructive <input checked="" type="checkbox"/>	Other: <u>012482-03</u>	# <u>23/00801</u>
PROPOSED USE:	Domestic, Single Family <input type="checkbox"/>	Domestic, Public <input type="checkbox"/>	Irrigation <input type="checkbox"/>	Industrial <input type="checkbox"/>	Other <input type="checkbox"/>	# <u>0000120</u>		<u>\$134.00</u>
CONSTRUCTION PROPOSED:							# <u>STERRE</u>	<u>\$134.00</u>
Casing: Diameter: _____ Gauge: _____ Material: _____ Conductor: No <input type="checkbox"/> Yes <input type="checkbox"/>	Single <input type="checkbox"/> Double <input type="checkbox"/>		Gravel Pack <input type="checkbox"/>	Puddled Clay: _____		# <u>CHNG</u>		<u>\$134.00</u>
Annular Space: Size: _____ Depth of Seal: _____ Concrete: _____ Grout: _____ Heat Cement: _____	Puddled Clay: _____		Type of Joint: _____				<u>\$0.00</u>	
Method of Disinfection: _____	Method of Sealing Access Opening: _____		Type of Joint: _____					

Well located within an existing public water system boundary. Yes No Name: _____

I hereby agree to comply with all laws and regulations of the County of Sonoma and State of California pertaining to water well construction. I will telephone (707) 565-1694 to notify the Environmental Health Specialist when I am commencing this work. I will furnish the Permit and Resource Management Department and the owner a copy of the State Water Well Driller's Report within 90 days in order to obtain final approval on this well. I acknowledge that the application will become a permit only after site approval and payment of fee. I understand that this permit is not transferrable and expires one year from date of issuance.

CONSTRUCTION PROPOSED:
 A currently effective certificate of Worker's Compensation Insurance is on file with the Sonoma County PRMD.
 I certify that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.
 Insurance Carrier: _____ Policy #: _____

Garra Jensen 3-23-00
 Signature of Well Driller Date

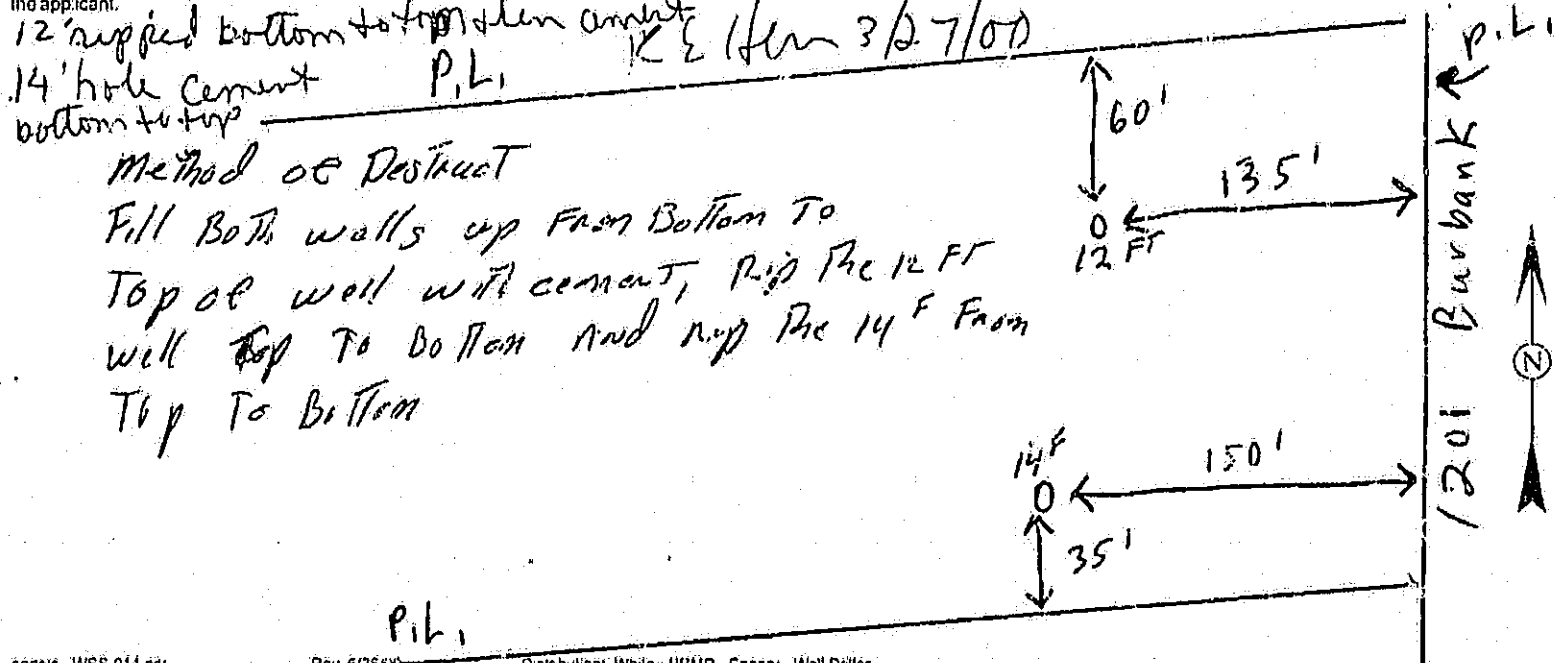
Signature of Applicant Date

FOR OFFICE USE ONLY - ENVIRONMENTAL HEALTH SERVICE

Site approved by: DOM DONAVAN Date: 3-23-2000 Water Scarce Area: Yes No

Finalized by: RE Her Date: 3/30/00 Sealed to depth of _____ Seal Observed: Yes No

Indicate below the exact location of well with respect to the following items: property lines, water bodies or water courses, drainage pattern, roads, existing wells, sewer main and laterals and private sewage disposal systems or other sources of contamination or pollution. INCLUDE DIMENSIONS. The validity of this permit depends upon the accuracy of the information provided by the applicant.



REQUEST FOR INSPECTION

W 21 00-0120

Perc Test

Well Seal

Date: 3/27/00 Time: 7:50 AM

Caller: Fritz

Phone # of Caller: N/A

Property Address: 1201 Burbank

City: SR

Property Owner: DeAngelis Const

Remarks: 10 AM

1201 Burbank

LU0033

By: REK



NUTTING & JENSEN DRILLING

1541 SAN JUAN AVENUE NORTH • REDWOOD CITY, CA 94061 • LIC. NO. 53884 • (415) 882-1271

WELL DESTRUCTION REPORT

Parcel # W/1 00-0120

Property Owner: Mrs De Angelis construction Inc
Address 3210 C. Bay Ln #D Santa Rosa

Location of well: 1201 Burnham Ave S. L.

Type of well: Rotary Cable Bucket Hand dug

Well diameter 2 well and 5 1/2 other 6"

Date of destruction 3-27-00

Method of destruction 1 well was old steel pipe casing 5 1/2" could
not be ripped due to size, debris" other well 6" 11' deep
ripped the casing from bottom to top on 6" well back water
cut 1/2" well then filled with cement from bottom to 1"
from the top

RECEIVED
MAR 29 2000
PERMIT AND RESOURCE
MANAGEMENT DIVISION
COUNTY OF SANTA ROSA
DMA

Jensen