

ERIK OLSborg Brunson Assoc, Inc.
707 2923341 Well Permit Application

WLS-031

Site Address: 1105 Highway 1
City/Town: Bodega Bay CA 94923 State Zip
Owner Name: Alan Frei
Mailing Address: 1004 Croatia Ct.
City/Town: Roseville CA 95661 State Zip
Phone: 916 947 8307
Contact Person:
Permit Number: WEL 19-0148
Assessor's Parcel Number: 100-091-016
Well Driller Name: Clem Heart Drilling
Mailing Address: 483 W. College Ave
City/Town: Santa Rosa CA 95401 State Zip
License Number: C 57 780357
Phone: 707 568 6095 Fax:

The validity of this permit depends upon the accuracy of the information provided by the applicant. A site plan must accompany this application. In addition to the information required on the Minimum Standard Site Plan (Form CSS-019), the site plan shall also include the proposed well location, existing well(s) location(s), GPS coordinates of proposed well, sewer mains and laterals, and other potential sources of contamination. If an inadequate site plan is provided and a second field visit is required, a charge at the current hourly rate will be assessed. The precise site location of the proposed well must be staked with the driller's name.

INDICATE TYPE AND NUMBER OF PROPOSED WELLS/BORINGS:

Indicate use: ☒ Residential ☐ Community ☐ Irrigation ☐ Industrial
Reason for new well: drill, log, sample, then backfill w/grout
☐ Destruct ☐ Class I Well ☐ Class II Well ☐ Reconstruction Reason for Class II:
[☒] Geotechnical Borings [☐] Geoexchange [☐] Monitoring [☐] Cathodic [☐] Dewatering
[☐] Performance Well [☐] Piezometer [☐] Inclinator [☐] Other:

Total number of wells on property: Number in use: Number inactive: Number abandoned:

Well located within an existing public water system boundary: Yes ☒ No ☐ Name of System: Bodega Bay

CONSTRUCTION PROPOSED:

Casing: Diameter: N/A Gauge: Material: Gravel Pack ☐ Conductor: Yes ☐ No ☐
Sand Pack ☐

Annular Space: Size: Depth of Seal: Seal Material: bentonite

Method of Disinfection: Method of Sealing: Type of
Access Opening: Joint:

DESTRUCTION PROPOSED: Well Diameter: Well Depth: Well Casing:

Method of Destruction:

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier: State Fund

Policy No.: 9040476-17

(This section need not be completed if the permit is for one hundred dollars (\$100) or less).

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 24 hours prior to commencing this work. I will furnish the Permit and Resource Management Department and the owner a copy of the State Well Completion Report within thirty (30) days in order to obtain final approval on this well as required by SONOMA COUNTY CODE, CHAPTER 25B. 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 the date of issuance.

Signature of Well Driller: [Signature] Date:

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

DO NOT WRITE BELOW THIS LINE - To Be Completed by PRMD Staff

Site approved by: [Signature] Date: 05/02/19 Seal Inspection Date: EXPIRED EHS
Finaled by: Date: GW Zone: 1 2 3 4
Comments: Please submit log so we can final this permit.

Sonoma County Permit and Resource Management Department

2550 Ventura Avenue ♦ Santa Rosa, CA ♦ 95403-2829 ♦ (707) 565-1900 ♦ Fax (707) 565-1399