



ENVIRONMENTAL MANAGEMENT DEPARTMENT

<http://www.edcgov.us/EMD/>

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REGISTERED INSPECTOR'S WATER WELL SEALING/DESTRUCTION RECORD

PERMIT #	APN#	ACTIVITY DATE:
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TYPE AND QUANTITY OF MATERIAL USED:**METHOD OF PLACEMENT:**

_____ FEET (From packer to top of seal)

REMARKS:

Employee installing seal:

DESCRIBE ANY VARIANCE IN THE SEALING METHOD OR MATERIAL FROM PERMIT CONDITIONS:**GPS/GIS COORDINATE (WGS 84):**

LONGITUDE	LATITUDE	ELEVATION
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INSPECTION NOTES:**Registered Inspector Certification:**

Signature:

Date:

Print Name:

Type.

License No.