



SHALLOW HOLE NOTIFICATION APPLICATION

FOR USE BY ANNUAL SHALLOW HOLE PERMIT HOLDERS ONLY.

THIS IS NOT A PERMIT APPLICATION

ONE APPLICATION PER PARCEL. GEOTECHNICAL BORINGS FOR NON-INDUSTRIAL SITES ONLY
ENVIRONMENTAL HEALTH STAFF MUST BE NOTIFIED AT LEAST 2 WORKING DAYS PRIOR TO DRILLING

PLEASE PRINT CLEARLY. *REQUIRED FIELD MUST BE COMPLETED. THIS IS NOT A PERMIT

LEGAL OWNER INFORMATION	*Legal Property Owner/Boring Owner		
	*Address		Phone Number:
	*City	State	Zip code
	*Property owner name (if different from Boring Owner)		Address/ City/ State/ Zip Code
SITE INFORMATION	*Site Name:		
	*Address:		
	*City/ State/ Zip code	*Assessor's Parcel Number REQUIRED:	Lot/Parcel Number:
	*On-site Contact Name:		*On-site Contact Cell Number:
LICENSED DRILLER INFORMATION			
*Business Name:		*Contact Name:	*Business Phone:
*Mailing Address:		*C-57 License #:	Email Address:
CONSULTANT/ENGINEER INFORMATION			
*Business Name:		*Contact Name	*Business Phone:
*Mailing Address:		Email Address:	
CONSTRUCTION/DESTRUCTION SPECIFICATIONS			
DATE OF DRILLING:	Number Geotechnical Borings:	Boring Depth (b.g.s.):	
Type of Material for annular seal/destruction (specify mix or product): <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Cement ** (Bentonite chips for transition seal only)**		Method of Drilling/Destruction/Other:	
<input type="checkbox"/> PLOT MAP <input type="checkbox"/> RIGHT OF ACCESS AGREEMENT			

I hereby certify that the above information and submitted plans are true and correct and that the proposed work will comply with all permit conditions and applicable laws and regulations. I agree to obtain all required inspections, maintain a copy of the approved notification and plans at the job site until, and obtain written authorization prior to deviating from the approved notification application or annual shallow hole permit conditions.

 Signature of Annual Shallow Hole Permittee

 Date

FOR OFFICE USE ONLY

FA #:	P/E: 4307	WP#	DATE RECEIVED:	REHS:	SUPERVISOR:
AMOUNT DUE: \$	AMOUNT PAID: \$	CHECK #:	CASH	CREDIT CARD: <input type="checkbox"/> MC <input type="checkbox"/> VISA	XR
INITIAL:	DATE APPROVED:	<input type="checkbox"/> CONDITIONS			