



APPLICATION FOR WATER WELL DRILLING LICENSE AND PUMP INSTALLER LICENSE

State Form 417 (R3 / 11-10)
Approved by State Board of Accounts, 2010

Return to:
INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF WATER
402 W. Washington St., Room W264
Indianapolis, IN 46204-2641

The provisions of IC 25-39 require anyone who operates water well drilling or driving equipment and engages in the drilling of water wells, or the installation or service of water well pumping equipment in Indiana to have a valid Indiana Water Well Drilling or Pump Installer License. To qualify for an Indiana water well drilling license or pump installer license, an applicant must be at least eighteen (18) years of age, successfully complete a competency examination, and provide three reference statements to the Division of Water, of which at least two must be from a licensed water well driller/pump installer or a licensed plumber. (IC 25-39-3-3).

Full Name: _____
(First) (Middle) (Last)

Business Address: _____
(Street or Rural Route)

(City) (State) (ZIP code)

Office Telephone Number: _____ (Include area code) Email Address: _____

Date of Birth: _____

Type(s) of Equipment Operated or Installed: _____

Number of Years Operated: _____

Employment History (as a water well driller or pump installer):

Company Name	Company Address	Employment Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

The annual fee for a water well drilling/pump installer license is one hundred dollars (\$100) for a calendar year; whether it is for one or both endorsements. Please make your check or money order payable to the DEPARTMENT OF NATURAL RESOURCES (or simply DNR).

I hereby swear or affirm under the penalties for perjury that the information submitted herewith is, to the best of my knowledge and belief, true, accurate, and complete.

Signature: _____ Date: _____

Name of Company: _____

Note: An application for an original license is not complete until three (3) reference statements are completed and received by the Division of Water.

FOR ADMINISTRATIVE USE ONLY

Date Application Was Received: _____ Application No.: _____

License Number Issued: _____ Issued By: _____