

Your personal information is being collected by Alberta Environment and Parks (AEP) under the authority of section 33(c) of the *Freedom of Information & Protection of Privacy Act (FOIP)* and will be managed under section 2 of the *FOIP Act*. The personal information and other registration information collected will be used for the purpose of processing your application for the approval to drill water wells and to create a drilling contractor list that is publically available on the AEP website in accordance with section 15(1) of the Water (Ministerial) Regulation of the *Water Act*. Should you wish to have your personal information removed, corrected, or if you have any further questions or concerns, please contact AEP's Groundwater Policy Section (780) 427-9517.

APPLICATION FOR APPROVAL TO DRILL WATER WELLS UNDER THE WATER ACT

APPLICANT: (Print Please)

Company Name:		Owner Name:	
Mailing Address: (Street, PO Box, etc.)	Town:	Province:	Postal Code:
Legal Land Description of Shop: Rural: (LSD or Qtr, Sec, Twp, Rge, Meridian; Lot, Blk, Plan) Urban: (Municipal Address)			
Phone:	Fax:	Email:	

CLASS (check one)	APPROVAL DESCRIPTION
Class A	Drilled or bored wells for diversion and use of groundwater
Class B	Dug wells
Class C	Special groundwater investigation wells
Class F	Vertical Closed-Loop Ground Source Heat Exchange Wells (Geothermal)

DRILLING MACHINES	Number to be operated
Auger	
Backhoe	
Boring	
Cable Tool	
Rotary - mud	
Rotary - air	
Rotary – combination (specify)	

CERTIFIED JOURNEYMEN DRILLERS: **Copy of certificate must accompany this application**

NAME:	JOURNEYMAN CERTIFICATION NUMBER:

APPLICATION FEE:

\$100 payable by cheque or money order to **Government of Alberta** is required with this form.

Mail to:
Alberta Environment & Parks
Groundwater Policy Section
7th floor, 9820 106 Street
Edmonton AB T5K 2J6

REGISTERED APPRENTICES: **Copy of registration must accompany this application**

NAME:	APPRENTICESHIP CONTRACT NUMBER:	CURRENT YEAR OF APPRENTICESHIP:

STATEMENT OF CONFIRMATION: The information given on this form is true to the best of my knowledge.

Signature: _____ Print Name: _____ Date: _____

OFFICE USE ONLY:			
File No.:	Fee Receipt No.:	Operation ID:	Approval ID: