

State of Florida

Water Well Contractor's License Application

Instructions

- I. Type or print, using black ink and mail completed application including application fee to:

South Florida Water Management District
P.O. Box 24680
West Palm Beach, FL 33416-4680
ATTN: Well Contractor Licensing

If you are an out-of-state applicant, you should apply to the water management district in which you intend to conduct business.

1. Name of person to be licensed: _____
Last Name First Name Middle Initial Name as it is to appear on license
 2. Name of business firm or corporation affiliation: _____
(if applicable at time of application)
 3. Business address: _____
Street Address or Rural Route County
 4. _____
City State ZIP Code Business Phone: Area Code Phone Number
 5. _____
Cell Phone Fax No. Email Address
 6. Home Address: _____
Street Address County
 7. _____
City State ZIP Code Home Phone: Area Code Phone Number
 8. _____
Mail Address (if different from above)
 9. Date of Birth: ____ / ____ / ____
- II. Make check or money order for \$150 (non-refundable) application fee payable to South Florida Water Management District. **PLEASE DO NOT SEND CASH.**
- III. A candidate for a water well contractor license must be 18 years old and have at least two years experience in constructing, repairing or abandoning water wells. Satisfactory proof of such experience shall be demonstrated by providing:
1. Evidence of the length of time the applicant has been engaged in the business of construction, repair, or abandonment of water wells as a major activity, as attested to by a letter from three of the following persons:
 - a. a water well contractor,
 - b. a water well driller,
 - c. a water well parts and equipment vendor, or
 - d. a water well inspector employed by a governmental agency.
 2. A list of at least 10 water wells that the applicant has constructed, repaired, or abandoned within the preceding 5 years. Of these wells, at least seven must have been constructed, as defined in s. 373.303(2) by the applicant.

The list shall also include:

 - a. the name and address of the owner or owners of each well,

- b. the location, primary use and approximate depth and diameter of each well that the applicant has constructed, repaired, or abandoned,
- c. the approximate date the construction, repair, or abandonment of each well was completed.

Please list these wells here.

Well Owner(s), Address, City & State	Well Location (Address)	Primary Use of Well, Depth & Diameter	Completion Date (Approximately)	Construct/Repair/ or Abandonment?
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

IV. Chapter 62-531.300 requires all water well contractor license applicants to complete a minimum of 12 approved coursework hours. A minimum of six approved coursework hours must be related to water well construction practices and applicable water well construction rules. No more than six approved coursework hours may be related to safety and business practices. Please attach copies of certificates of completion of approved coursework. Confirmation of approved coursework completion will be accepted from the Department or the Administrator, if available, in lieu of certificates of completion.

V. Examinations shall be given by the District as scheduled by the District.

Please schedule me for an examination. I understand that the application is not complete until I have passed the required examination with a score of at least 70% correct.

Signature

Date

FOR DISTRICT USE ONLY

Application and Fee Received

Date

Initials

Continuing Education Credits Received

Date

Initials

List of Wells Complete and Satisfactory

Date

Initials

Applicant Notified of Examination Date

Date

Initials

Applicant Failed Examination and Notified

Date

Initials

Applicant Passed Examination and Notified

Date

Initials

License Number _____

Date Issued _____