

Township of Mendham Board of Health

Incorporated March 29, 1749

P.O. BOX 520
BROOKSIDE, NJ 07926
(973) 543-4555/FAX (973) 543-6630

WELL PERMIT & CERTIFICATE OF POTABLE WATER SUPPLY APPLICATION PACKAGE

INSTRUCTIONS

Please include the following with this application:

- Correct Fee (see fee schedule on attached FAQs)
- A copy of the NJDEP Well Permit
- A copy of the NJDEP Decommissioning Approval (if a well will be decommissioned)
- A site plan (please see attached FAQs for information on what must be included on the site plan)

Applications must be submitted to the Board of Health Secretary at least ten (10) days prior to the Board of Health at which consideration is desired, provided that this requirement shall not apply to emergency or repair work.

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INDIVIDUAL WATER SUPPLY SYSTEM PERMIT APPLICATION

I. PROPERTY AND APPLICANT INFORMATION

Application Date		
Block	Lot	Property Address
Name of Property Owner(s)		Property Owner(s) Address <i>(If Different from Above)</i>
Owner's Telephone No.	Name & Address of Applicant	Applicant's Telephone No.

II. WELL DRILLER INFORMATION

Name & Address of Well Driller		Driller's Telephone No.
NJDEP License Number(s)	Please check your NJDEP License Designation: <input type="checkbox"/> Master Well Driller <input type="checkbox"/> Journeyman <input type="checkbox"/> Journeyman Class B <input type="checkbox"/> Monitoring Well Driller <input type="checkbox"/> Dewatering Well Driller <input type="checkbox"/> Soil Borer	

III. ENGINEER INFORMATION

Name & Address of Engineering Firm		Firm's Telephone No.
NJ Professional Engineer License No.	Name of Professional Engineer	

IV. WELL INFORMATION

Type of Well <input type="checkbox"/> Potable Water <input type="checkbox"/> Irrigation/Non-Potable
Type of Work To Be Performed <i>(Check all that apply)</i> : <input type="checkbox"/> Construction of New Well <input type="checkbox"/> Alteration to Existing Well <input type="checkbox"/> Repair to Existing Well <input type="checkbox"/> Well Decommissioning/Abandonment
In the space below, please describe the reason for work:
Will the well have a water filtration or treatment system? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>If yes</u> , please describe the type of system below:

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If a well will be decommissioned/abandoned, please describe how decommissioning/abandonment will be performed (a copy of the NJDEP Well Decommissioning Approval must be included with this application):

V. LOCATION, DESIGN, & YIELD INFORMATION (For Construction of New Wells Only)

PLEASE PROVIDE THE ELEVATION IN FEET OF THE SEPTIC SYSTEM SERVICING THE PROPERTY IN RELATION TO THE NEW WELL.

Septic Tank(s): _____	Seepage Pit(s): _____
Distribution Box: _____	Disposal Field(s): _____
Line to Disposal Bed(s) or Seepage Pit(s): _____	Cesspool(s): _____

PLEASE PROVIDE THE FOLLOWING INFORMATION REGARDING THE NEW WELL.

Depth of Well (Feet): _____	Yield (How many gallons per minute?) _____
Depth of Casing (Feet): _____	The attached <i>Mendham Township Board of Health Well Yield Certification Form</i> must be completed and submitted to the Board of Health Secretary upon completion of work.
Diameter of Casing (Feet): _____	

PLEASE PROVIDE THE DISTANCES IN FEET FROM THE PROPOSED NEW WELL FOLLOWING SITE FEATURES:

Nearest Property Line: _____	Septic Distribution Box: _____
Public Water Supply Line(s): _____	Seepage Pit(s): _____
Water Courses (Reservoirs, Streams, Lakes, Ponds): _____	Dry Well(s): _____
Building Sewer or Septic Line(s): _____	Cesspool(s): _____

VI. SITE PLAN

Please attach a site plan detailing the construction, alteration or repair to this application. The site plan must be drawn to scale and include any of the following details:

1. All structures, including the principal structure (e.g. residence) and accessory structures (garages, sheds, gazebos, etc.) on the property;
2. The property lines with adjacent lots;
3. The location of any existing wells on the property including those which were previously decommissioned or currently used for irrigation/non-potable water usage;
4. The location of suction lines and water service lines;
5. The location of any easements on the property;

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- 6. The location of public roadways, public sewers, or public water supply service lines adjacent to the property;
- 7. The location of any above-ground or underground fuel storage tanks;
- 8. The location of any septic systems on the property including the following septic system components: septic tank(s), distribution box (d-box), disposal field(s), seepage pit(s), and/or dry well(s);
- 9. The location of any existing or proposed water storage tanks;
- 10. The location of the proposed new well;
- 11. Distances (in feet) must be provided from the proposed new well to all of the applicable structures, property lines, and locations listed above; and
- 12. The elevation (in feet) of the proposed new well in relation to the septic system and any of its individual components.

VII. CERTIFICATION

I certify that the information contained in this information is true and correct. I further certify that the location and design of the proposed system, alteration, or other work comply with all applicable local and state regulations and/or standards governing the same.

PROFESSIONAL ENGINEER

Print Name	Signature	Date
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Affix Seal Here:

Name of Engineering Firm

OR

WELL DRILLER

Print Name	Signature	Date
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Name of Well Drilling Firm

FOR BOARD OF HEALTH USE ONLY

Application Fee Paid: _____ Date Paid: _____
 Alteration, Repair, Abandonment Fee Paid: _____ Date Paid: _____
 Permit Number: _____ Date Issued: _____
 Date of Board of Health Review: _____ BOH Approval: Granted Denied
 BOH President Signature: _____ Date: _____
 Emergency Alteration/Repair (Chapter 397-7): Yes No
 REHS/HO Signature: _____ Date: _____

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INDIVIDUAL WATER SUPPLY SYSTEM PERMIT APPLICATION FREQUENTLY ASKED QUESTIONS

When is a permit required?

In accordance with Mendham Township Board of Health regulations (Chapter 397), a permit is required for construction, alteration, abandonment/decommissioning or repair of an individual water supply system.

What is the difference between an alteration and a repair?

An alteration is any modification of an existing individual water supply system. A repair is the performance of work which is strictly limited to the repair or replacement of an existing system component including the pump, a section of pipe, the tank, the filter (or other similar device) and which does not involve any change whatsoever in the design, location, or portion of the existing system.

How do I obtain a permit?

A separate application must be filed with the Board of Health for each permit. Application must be submitted at least ten (10) days prior to the Board of Health meeting at which consideration of the application is desired.

Who can perform the work?

Only individuals who are properly licensed by the NJ Department of Environmental Protection (NJDEP) are permitted to install, service, and decommission wells and pumps. To determine if an individual is licensed, contact the NJDEP, Division of Water Supply & Geoscience at 609-984-6831 or via email: wellpermitting@dep.nj.gov. Additional information may be found on NJDEP's website: www.nj.gov/dep.

What are the permit fees?

Applications must be accompanied by the required fee(s):

Application Fee:	\$230.00
Alteration Fee:	\$120.00
Repair Fee:	\$60.00
Reinspection Fee:	\$60.00
Permit Renewal Fee:*	\$10.00
Well Abandonment or Conversion to Nonpotable Well Fee:	\$110.00
Technical Review Fee:**	\$300.00

**Every permit to install a new individual water supply system shall expire one (1) year after the first business day following approval of the application (the date of issuance), unless prior to that time, construction of the realty improvement with respect to which the permit was issued shall have been commenced, in which event the permit shall remain valid and in effect for a period of two years from the date of issuance. The Board of Health may in its discretion renew a permit which has expired.

*Payment of a technical review fee is only required if the Board of Health determines that the application requires review, study, research, reporting, and/or testimony by a Professional Engineer contracted by the Board of Health.

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Other than the application and the appropriate fee, what other documents must I submit for a permit?

Applications for construction of any well must include a copy of a valid permit issued by the NJDEP.

In addition, applications for construction, alteration, or repair of an individual water supply system must include a site plan, which is drawn to scale, and includes the following details:

1. All structures, including the principal structure (e.g. residence) and accessory structures (garages, sheds, gazebos, etc.) on the property;
2. The property lines with adjacent lots;
3. The location of any existing wells on the property including those which were previously decommissioned or currently used for irrigation/non-potable water usage;
4. The location of suction lines and water service lines;
5. The location of any easements on the property;
6. The location of public roadways, public sewers, or public water supply service lines adjacent to the property;
7. The location of any above-ground or underground fuel storage tanks;
8. The location of any septic systems on the property including the following septic system components: septic tank(s), distribution box (d-box), disposal field(s), seepage pit(s), and/or dry well(s);
9. The location of any existing or proposed water storage tanks;
10. The location of the proposed new well;
11. Distances (in feet) must be provided from the proposed new well to all of the applicable structures, property lines, and locations listed above; and
12. The elevation (in feet) of the proposed new well in relation to the septic system and any of its individual components.

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Am I required to schedule inspections with the Board of Health?

Yes. The following required inspections must be scheduled at least 24 hours prior to the start of work: (1) when the well casing is being installed and grouted and (2) when a pitless well installation is being made.

What are the requirements for abandoning an existing well?

Once the well work has been completed, can it be placed into operation?

No. The Board of Health must issue a certificate of potable water supply prior to the well being placed into operation.

What are the requirements of a certificate of potable water supply?

In order for the Board of Health to issue a certificate of potable water supply, the following requirements must be met:

1. All of the required inspections (when well casing is being installed and grouted and when a pitless well installation taking place) have been performed by the Township Health Department.
2. A system yield certification form has been completed, signed, and returned to the Township Health Department.
3. A copy of a water quality laboratory report which confirms that the water meets the water quality standards for bacteria, chemistry, metals, and volatile organics set by the Board of Health has been provided (see attached sheet). The report must be from a laboratory which has been certified by the NJ Department of Environmental Protection. A list of certified labs can be found at this web link:

<http://www.nj.gov/dep/enforcement/oqa/certlabs.htm>

4. An as-built plan of the system which details the exact location of the well in relation to the foundation of the building being served.

What are the requirements for abandoning an existing well?

The individual performing the abandonment must be licensed by the NJDEP for the decommissioning of wells. In addition, an application for well abandonment must be completed and submitted to the Board of Health with the required fee (see page 1 of this document). A copy of the NJDEP well decommissioning approval must accompany the application. Upon completion of the abandonment a copy of the NJDEP decommissioning report must be submitted to the Board of Health.

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When must wells be abandoned?

Per N.J.A.C. 7:9D – 3.1, when drilling a new well, existing wells that meet certain criteria (see examples below) are required to be decommissioned by a Licensed Well Driller:

- Abandoned wells
- Damaged wells
- Wells been replaced by another well

However, some owners may forego decommissioning if the well is properly re-classified by a Licensed Well Driller for purposes such as irrigation (lawn watering, agricultural etc.). This re-classification process includes the requirement that all piping be disconnected from the potable water supply/distribution system. A copy of an NJDEP Well Permit indicating an approved re-classification to non-potable use must accompany any application where an applicant desires to maintain another well on the property.

I am purchasing a home in Mendham Township which is served by a well. Am I required to obtain a certificate of compliance for the well?

You would be required to obtain a certificate of potable water supply. To do so, you must complete a Board of Health application for the certificate. A copy of a water quality laboratory report which meets the water quality standards for bacteria, chemistry, metals, and volatile organics set by the Board of Health has been provided (see attached sheet). The report must be from a laboratory which has been certified by the NJ Department of Environmental Protection. A list of certified labs can be found at this web link: <http://www.nj.gov/dep/enforcement/oqa/certlabs.htm>

I am looking to install an irrigation well (for gardening/non-drinking purposes). Do I need a permit? Are there any specific requirements for irrigation wells.

A permit from the Township Board of Health is required for all irrigation wells (wells which are intended for non-potable use). All application, permits, inspections, and water parameter requirements required for potable wells are also required for irrigation wells. For more information, please contact the Township Health Department at (973) 543-4555.

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REQUIRED WATER & CORROSIIVITY STANDARDS FOR CERTIFICATE OF POTABLE WATER SUPPLY

Prior to the issuance of a certificate of potable water supply for a new individual water supply system or prior to the transfer of title for a single family dwelling served by an existing individual water supply system, the Mendham Board of Health must be provided with reports of tests establishing that the system will meet the water quality and test of corrosivity requirements below. Testing may only be performed by testing laboratory certified by the NJ Department of Environmental Protection.

ITEM	STANDARD
<u>Bacteria</u>	
Total coliform	None detected
<u>Chemistry</u>	
Fluoride	2.0 mg/l maximum
Nitrate	10.0 mg/l as N maximum
Turbidity	1 turbidity unit (TU) maximum
pH	6.5 minimum to 8.5 maximum
Hardness	50 mg/l minimum*
*Whenever hardness exceeds 250 mg/l, it may be desirable to undertake corrective action.	

METALS - ATOMIC ABSORPTION	
Arsenic	0.03 mg/l maximum
Barium	1.00 mg/l maximum
Cadmium	0.005 mg/l maximum
Chromium	0.05 mg/l maximum
Iron	0.30 mg/l maximum
Lead	0.015 mg/l maximum
Manganese	0.05 mg/l maximum
Mercury	0.002 mg/l maximum
Selenium	0.05 mg/l maximum
Silver	0.05 mg/l maximum
VOLATILE ORGANICS	
Chemical scan	If positive, tests shall be made for specific chemicals, none of which shall exceed state maximum contaminate levels

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WELL YIELD CERTIFICATION

(To be completed by Well Driller pursuant to Mendham Township BOH Code, Chapter 379-9 A)

Property Address: _____ Block: _____ Lot: _____

Name & Address of Well Driller:

NJDEP License Number: _____

This is to certify that I have performed testing of the well system installed at the above captioned property for yield on _____, _____, 20____ and that:

- (1) The system yield is not less than five (5) gallons per minute.
- (2) The yield was determined through the use of a four-hour pumping test.
- (3) The as-built plan of the well showing the exact location of any well in relation to the foundation of the building being served (PLEASE ATTACH AS-BUILT PLAN) is correct.

I further certify that said test indicated a static level of _____ and drawdown of _____ during the pumping test, and a recovery time to static level of _____.

Signature of Well Driller Printed Name of Well Driller Date

FOR OFFICIAL USE ONLY – REVIEW OF CERTIFICATE

Printed Name of REHS Signature of REHS Date