



RURAL DOMESTIC WATER WELL PROGRAM APPLICATION FORM

APPLICATION # _____ DATE: _____

TYPE OF SERVICE: _____
APPLICANT: _____
ADDRESS: _____
CITY: _____
POSTAL: _____ PHONE: _____
ROLL #: _____
PLAN #: _____ LOT LOCATION: _____
LOT: _____ QUAD _____
APPLICANT SIGNATURE: _____

APPROVAL CALCULATIONS (FOR OFFICE USE ONLY)

ASSESSED VALUE:

LAND: _____
IMPROVEMENT: _____
LESS EXISTING LIP: _____
TOTAL: _____
X 25% _____

ELIGIBLE FINANCIAL LOAN BY RDWWP: _____

PROCEED: YES: _____ NO: _____

RDWWP APPROVAL: _____ DATE: _____