

Record of Inspection – Private Water Supply System as generated through the Virginia Department of Health's Environmental Health Database

Permit ID:
Tax Map/GPIN:
Locality:

<Property Owner>
Name:
Mailing Address:
Phone:

<Property Location>
Property Address:
Subdivision: , Section: , Lot:

_____ is hereby granted permission to operate a Private Well at the above referenced location, under the following parameters:

Class:
Well Type:
Facility Type:
Casing Depth: feet
Grout Depth: feet
Yield: GPM

This approval is issued in accordance with the provisions of Title 32.1, Chapter 12 of the Code of Virginia as Amended, and Sections 12VAC 5-630-310, -320, -370, -430, and -440 of the Private Well Regulations of the Virginia Department of Health. The issuance of an inspection statement does not denote or imply any guarantee by the department that the private well will function for any specified period of time. It shall be the responsibility of the owner or any subsequent owner to maintain, repair, replace or to comply with the requirements to abandon any private well.

Construction Completion Date:
Effective Date:

Sincerely,

Virginia Department of Health