

City of Becker Sandpoint/Drive-Point Well Application

Sarah Schafer Public Works 11956 Gardner Street P.O. Box 250 Becker, MN 55308 763-200-4275 pubwks@ci.becker.mn.us

Date:	
Owner Name:	
Owner Address:	
Owner Phone Number:	Email:
Site Address:	
*** Please provide a drawing/picture of where form can be utilized)	e the well will be located***(The back of this
***There is no fee associated with this applicate you fill out this form and either return it to the provided above! Thank you for your attention t	
at 763-262-4331 and register their shallow well. make sure there is not a cross connection to the Cit	t The City of Becker Water Supply Department A Water Supply Employee will inspect the well to
Place Sticker Hore	
Signature of Applicant	Signature of City of Becker Official
Date of Applicant Signature	Date of Inspection

