



TENNESSEE DEPARTMENT OF ENVIRONMENT & CONSERVATION
DIVISION OF WATER RESOURCES – DRINKING WATER UNIT

Davy Crockett Tower
500 James Robertson Parkway, 9th Floor, Nashville, TN 37243

REQUIRED WELL LICENSING INFORMATION
APPLICATION FOR LICENSE RENEWAL 2024-2025

NAME OF LICENSE HOLDER (please print clearly): _____ LICENSE #: _____

A license holder must declare all employees working under his or her direct supervision and must provide a notarized Affidavit of Supervision statement, **for each employee who will be designated as an operator**, to the Division of Water Resources – Drinking Water Unit before operator cards will be issued. Affidavit of Supervision forms are enclosed.

(A) AFFIDAVIT OF SUPERVISION

1. Forms to be completed, notarized, and signed by the licensee **and** employee to be supervised. Please make copies if additional forms are needed.

(B) LICENSEE CONTACT INFORMATION : (Complete this section if there are changes to your contact information)

MAILING ADDRESS OF LICENSEE _____
E-MAIL ADDRESS OF LICENSEE _____
CELL PHONE # OF LICENSEE _(_____) _____
OFFICE PHONE NUMBER _(_____) _____

Please fill out the information requested below by listing employees you supervise and attach a notarized Affidavit of Supervision for each employee operating under your supervision. If additional space is needed, please attach a separate sheet.

(PRINT ONLY)

<u>OPERATOR NAME</u>	<u>ADDRESS</u>	<u>CITY</u>	<u>STATE/ZIP</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LIST NUMBER & TYPE OF DRILL RIG-WATER TRUCK OR PUMP TRUCK VEHICLES ON LINES BELOW:

NUMBER OF VEHICLE DECALS REQUESTED: _____

CERTIFICATION STATEMENT:

I certify, under penalty of law, including but not limited to penalties for perjury, that this document and all attachments were prepared by me, or under my direction or supervision; that all of the submitted information is to the best of my knowledge and belief true, accurate, and complete; and that I am lawfully present in the United States as a U.S. citizen or a qualified alien as defined in 8 U.S.C. §1641(b). I understand that the penalties for providing false information and making false or fraudulent statements or representations include revocation of my permit or license, civil penalties, and/or criminal prosecution resulting in a fine, imprisonment, or both.

SIGNATURE OF LICENSE HOLDER DATE

OFFICE USE ONLY

NUMBER OF DECALS SENT: _____ NUMBER OF OPERATORS: _____

DATE DECALS ISSUED: _____