

Application Instructions for Well Pump Installer License

Enclosed is an application for a South Dakota Well Pump Installer License for your use. The filing fee is based on the residency of the license representative(s) -- \$200.00 for South Dakota resident(s) and \$300.00 for nonresident(s). You are a resident if your primary residence is located in South Dakota and you have not claimed residency in any other state within ninety days of filing this application.

In addition to the information requested in No. 3 of the application, we are requesting further detailed information. On a separate sheet of paper, please list well repair or well pump installation experience with your own company and/or other companies. This information will need to be provided for each person listed as a license representative for your company.

Please provide the following for each license representative.

1. Dates worked with each well repair or well pump service company,
2. Position, authority and responsibilities with a company,
3. Types of wells repaired,
4. Types of pumps installed,
5. The name of the supervisor or someone that can verify work experience,
6. Address of the well repair or well pump service companies,
7. The manager or owner of the company, and
8. Well repair and well servicing equipment you have for working on wells or pumps.

If you have any questions, please feel free to contact Ken Buhler at (605) 773-3352.

TYPE OR PRINT IN INK

Mail application with fee to: Water Rights Program
\$200.00 SD resident, \$300.00 nonresident Joe Foss Building
523 East Capitol
Pierre, SD 57501-3181
Phone: (605)773-3352

NEW APPLICATION for
South Dakota Well Pump Installer
License to repair wells or install well pumps

1. Name of Application _____ Phone _____
(company)

Address _____
(street, RR, box) (town) (state) (zip code)

Each company must designate at least one License Representative who is responsible for work authorized on behalf of the License.

2. License Representative(s) _____ SD residents? Yes No

3. Provide description of experience and qualifications License Representative has in well pump installation:

(if necessary, attach additional paper)

4. Are you familiar with and agree to abide by the provisions of SDCL 46-6-9.1 to 46-6-9.5 inclusive, 46-6-14, 46-6-15, 46-6-18, 46-6-20, 46-6-21, and 46-6-27; and Water Management Board Rules Chapter 74:02:01 for Well Pump Installer licensing, Chapter 74:02:04 for well construction and Chapter 17 "Potable Water Supply System" of the 1996 National Standard Plumbing Code as adopted by the South Dakota State Plumbing Commission.

Yes No If answer is No, please request copies of laws and/or rules before submitting the application.

5. Has your company or license representative(s) ever been licensed as a well pump installer in South Dakota?

Yes No If answer is Yes, list years when licensed _____

STATE OF _____)
)SS
COUNTY OF _____)

I, _____

licensed representative(s) for _____
(company)

certify that I have read the foregoing application and that the matter therein stated is true.

Signed _____ License Representative License Representative

Signed _____ License Representative License Representative

Please provide the following for each additional license representative:

1. Dates worked with each well repair or well pump service company,
2. Position, authority and responsibilities with a company,
3. Types of wells repaired,
4. Types of pumps installed,
5. The name of the supervisor or someone that can verify work experience,
6. Address of the well repair or well pump service companies,
7. The manager or owner of the company, and
8. Well repair and well servicing equipment you have for working on wells or pumps.

A large empty rectangular box intended for providing the requested information for each additional license representative.