



Exemption Form for Replacement Well

Date: _____
Well Permit Number Assigned by Environmental Health: _____
APN: _____
List APN's for adjacent parcels served by the well: _____
Describe any existing irrigated agriculture on the property: _____
Owner/Applicant Name: _____ Contact Email: _____
Contact Phone _____

Action (Applicant)

Title 22, Section 22.30.204 of the County Code requires new wells in the Paso Robles Groundwater Basin to offset water demand when new or expanded irrigated crop production is proposed; however applicants for replacement agricultural wells or minor modifications to existing wells that are not proposed to serve new or expanded irrigated crop production may be exempt from Title 22, Section 22.30.204. An applicant can obtain a well exemption from the Department of Planning and Building by completing this form in association with a well permit submitted to the Department of Environmental Health. If approved, a copy of this form will be sent to the Department of Environmental Health to certify that the applicant is exempt from Section 22.30.204 and may proceed with the well permit application process per the requirements of Environmental Health.

By signing below, I _____, the property owner, certify that:

- a) The new well will replace an existing well on the subject property.
b) The existing well will no longer be used for agricultural purposes on the subject property.
c) The new well will not result in an increase in total groundwater consumption on the subject property.
d) Agricultural operations on the subject property will not differ from the existing agricultural use as a result of installation of the new well.
e) If at any time new or expanded agriculture is proposed for the subject property, the provisions of Title 22 Section 22.30.204 may apply and I will contact the Department of Planning and Building to obtain the necessary clearances.

Property owner signature: _____ Date: _____

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ACTION (STAFF ONLY):

A well clearance for a replacement well at the above referenced APN is

- Approved: Applicant may apply for a well permit through Environmental Health
- Additional information requested (describe): _____
- Denied

Processed By: _____ Date: _____
