



San Benito County Water District

30 Mansfield Road • P.O. Box 899 • Hollister, CA 95024-0899 • (831) 637-8218 • Fax: (831) 637-7267

Registration for Water Producing Facility

To be completed and returned to the San Benito County Water District when the well is connected to power and able to produce water.

Assessor's Parcel Number: _____
(Please list the parcel number on which well is located.)

Site Address: _____

Well Owner: _____ Telephone: _____

What date was the well connected to power and able to produce water? _____

What is the purpose of the well? Agricultural Domestic

Does the well supply household water? Yes No

Is the well used for irrigating? Yes No If so, how many acres? _____

Horsepower of pump motor: _____ h.p.

Size of discharge pipe (diameter): _____ inches

Property Owner Signature: _____ Date: _____

Mailing Address: _____

Note: A separate form must be completed for each well owned. For additional forms, go to www.sbcwd.com or contact the San Benito County Water District at (831) 637-821