



**MINNESOTA DEPARTMENT OF HEALTH
WELL DISCLOSURE CERTIFICATE
PLEASE TYPE OR PRINT ALL INFORMATION**

Indicate Total Number of Wells on Property _____

Fill out a separate well information page if more than **two** wells are located on the property.

| E. WELL LOCATION LEGAL DESCRIPTION | | | | | |
|--|-----------------------|--|---|-----------------------------|--------------------------------------|
| WELL #1 – If the property legal description has more than one section, township, or range number; quarter (or government lot); or lot or block number; provide specific legal description information regarding the physical location of this well. | | | | | |
| County Hennepin | Section No. | Township No. | Range No. | Quarter (or Government Lot) | |
| Lot No. 1 | Block No. 4 | Addition Name Fairview Gardens | | Outlot | Tract |
| WELL STATUS (Check only one box) WELL IS: <input type="checkbox"/> In Use (1) <input checked="" type="checkbox"/> Not in Use (2) <input type="checkbox"/> Sealed by Licensed Well Contractor (3)* <small>*Call MDH to verify sealing record is on file.</small> | | | | | Date of Well Construction or Sealing |
| <small>If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing contractor, check the well status as not in use. Also see "IMPORTANT NOTE" on page 1.</small> | | | | | Name of Licensed Well Contractor |
| <small>If well is not in use, is there an MDH variance for this well?</small> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>If yes, provide the variance tracking number (TN) _____</small> | | | <small>If the well is not in use, is there an MDH maintenance permit for this well?</small> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>If yes, provide the permit number _____</small> | | |

| | | | | | |
|---|-------------|---------------|--|-----------------------------|--------------------------------------|
| WELL #2 – If the property legal description has more than one section, township, or range number; quarter (or government lot); or lot or block number; provide specific legal description information regarding the physical location of this well. | | | | | |
| County | Section No. | Township No. | Range No. | Quarter (or Government Lot) | |
| Lot No. | Block No. | Addition Name | | Outlot | Tract |
| WELL STATUS (Check only one box) WELL IS: <input type="checkbox"/> In Use (1) <input type="checkbox"/> Not in Use (2) <input type="checkbox"/> Sealed by Licensed Well Contractor (3)* <small>*Call MDH to verify sealing record is on file.</small> | | | | | Date of Well Construction or Sealing |
| <small>If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing contractor, check the well status as not in use. Also see "IMPORTANT NOTE" on page 1.</small> | | | | | Name of Licensed Well Contractor |
| <small>If well is not in use, is there an MDH variance for this well?</small> <input type="checkbox"/> Yes <input type="checkbox"/> No <small>If yes, provide the variance tracking number (TN) _____</small> | | | <small>If the well is not in use, is there an MDH maintenance permit for this well?</small> <input type="checkbox"/> Yes <input type="checkbox"/> No <small>If yes, provide the permit number _____</small> | | |

SKETCH MAP – Sketch the location of the well(s) and include estimated distances from roads, streets, and buildings. **If more than one well on property, use the well location number above to identify each well.** The location of the well(s) must be provided. If the location of a well is not known, have the well located by a person qualified to locate wells, such as a licensed well contractor.

