



**ATTORNEY GENERAL'S MINISTRY AND
MINISTRY OF NATURAL RESOURCES**

H.M. Queen Elizabeth II Boulevard, Belmopan, Belize, C.A.

Ph: (501) 802-3412 Fax: (501) 802-2333

Email: hydrology@naturalresources.gov.bz

FORM BZ/NIWRA/0002

**National Integrated Water Resource Act 2010
PART III Section 16, 40, 41**

PERMIT APPLICATION

WELL DRILLING OPERATIONS CONSENT FORM

Please read through this form and write clearly in the answer spaces.

1. Applicant details

1.1 Applicant Name

(a) Title (Mr., Mrs., Miss)

First name

Last name.....

(b) Name of Company or organization, (if applicable)

.....
.....

(c) Registration Number, if applicable.....

(d) Social Security Number:

1.2 Address

No. Street Name

City\Town District.....

Country Region

1.3 Contact Numbers, including the area code

Phone Mobile

Email Email 2

1.4 What is the nature of your interest in the land where well-drilling is to take place?

Owner Lessee Tenant Other (explain)

1.5 Purpose of Drilling:

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2.0 Drilling Contractor Details:

2.1 Name of Drilling Contractor

Address of Drilling Contractor

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2.2 Well Driller Licence Number

Expiration Date of Well Driller Licence (dd/mm/yy)

3.0 Location/Technical Details:

Location of Proposed /Existing Work::

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Groundwater Province Name:

Well Name: Well point (Coordinates).....

(i) Estimated depth of borehole or well metres (feet)

(ii) Diameter of borehole or well centimetres (inches)

(iii) In the case of artesian supplies, the method proposed for controlling the flow from the borehole and for preventing leakage around the borehole lining

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(iv) Volume of water required m³/day

3.3 Method of Drilling

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Note:

Completed forms must be accompanied by – (where applicable)

- (1) Two copies of a map on a scale of 1:50,000 showing location of works, well (s);
- (2) Copy of Well Driller Licence;
- (3) Such other documents as the Authority may require; and
- (4) Application fee of BZ\$500.00

I hereby apply for a well drilling permit under the National Integrated Water Resources Act and declare that to the best of my knowledge and belief the particulars set out in this application are true and correct.

.....
Signature of Applicant

.....
Date

To be completed by the Minister

Permit Granted Refused

Date of grant or refusal of licence
(dd/mm/yyyy).....

If application refused, reason for refusal

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**Honorable Senator Vanessa Retreage
Attorney General’s Ministry and
Minister of Natural Resources**