CCGCD
COLORADO COUNTY GROUNDWATER CONSERVATION DISTRICT

910 Milam Street, Columbus, TX 78934
Phone: (979)732-9300 | www.ccgcd.net

Permit Renewal Application

1. CLASSIFICATION
What is the permit number for this well/well system (located on the original permit)?

2. WELL OWNER AND/OR PERMIT APPLICANT		
Name:		
Address:		
City/State/Zip:		
Phone:		Email:

3. WELL CAPACITY AND USAGE	
Has the pump capacity of the well been increased? ( ) Yes ( ) No	
Has the usage of the well changed? ( ) Yes ( ) No	If yes, what is the new usage?

4a. PROJECTED WATER USAGE FOR 3 YEAR PERMIT		
Do you anticipate using LCRA water for irrigation and/or waterfowl? ( ) Yes ( ) No		
YEAR 1 PROVIDE PROJECTED USAGE (E.G., RICE, COTTON, CORN, HAY, WATERFOWL, POND FILL)		
Use:	Number of Acres:	Projected Water Usage:
Use:	Number of Acres:	Projected Water Usage:
Use:	Number of Acres:	Projected Water Usage:
YEAR 2 PROVIDE PROJECTED USEAGE (E.G., RICE, COTTON, CORN, HAY, WATERFOWL, POND FILL)		
Use:	Number of Acres:	Projected Water Usage:
Use:	Number of Acres:	Projected Water Usage:
Use:	Number of Acres:	Projected Water Usage:
YEAR 3 PROVIDE PROJECTED USAGE (E.G., RICE, COTTON, CORN, HAY, WATERFOWL, POND FILL)		
Use:	Number of Acres:	Projected Water Usage:
Use:	Number of Acres:	Projected Water Usage:
Use:	Number of Acres:	Projected Water Usage:

5. METERS
Is your well/well system metered? ( ) Yes ( ) No

CERTIFICATION:

I hereby certify that the information given herewith is true and accurate to the best of my knowledge and agree that water produced/withdrawn from the proposed well(s) in this application will be used for beneficial use at all times. I further agree to abide by District rules.

_____	_____	_____
Print Name	Signature of Well Owner/Agent	Date