

Instructions

Please **print** if completing by hand. **Letter** sized paper is preferred when printing. In order to process your search request, please complete this form in full and submit it to the Water Well Records Management. When the search is completed you will be provided with the results. If you have any questions, please call the Water Well Help Desk at 1 888 396-9355 (Toll Free) or visit www.ene.gov.on.ca.

Please fax, mail or email this form to: Ministry of the Environment
Environmental Monitoring and Reporting Branch
Water Well Records Management
125 Resources Rd.
Toronto ON M9P 3V6
Fax 416 235-5960 Email: WellsHelpdesk@ontario.ca

NOTE: The Ministry cannot and does not represent or guarantee that the Well Record information is current, accurate or complete. The Ministry assumes no responsibility for errors or omissions in the Well Record information and is not liable in any way for damages of any kind arising out of or related to the Well Record information or for delay or failure to provide the Well Record information. Any reliance upon the Well Record information provided is solely at the risk of the requester. Well Record information provided is subject to the *Freedom of Information and Protection of Privacy Act, (FIPPA)*, Ontario, R.S.O. 1990, c. F.31.

Section A – Contact Information

First Name		Last Name		Request Date (yyyy/mm/dd)	
Company				Your File/Project No.	
Street Number		Street Name		Apt No. /RR No.	
City, Town or Village			Province	Postal Code	
Phone Number (including area code) ()		Fax Number (including area code) ()	Email Address		
Please indicate how you would like to receive your Water Well Record data: <input type="checkbox"/> Mail <input type="checkbox"/> Email (pdf file) <input type="checkbox"/> Fax				Well Contractor Licence No.	
Record Required for		<input type="checkbox"/> Water Shortage	<input type="checkbox"/> Well Problem	<input type="checkbox"/> Real Estate Transaction	<input type="checkbox"/> Other

Section B – Well Location Information

Please provide as much accurate information as possible to expedite fulfilling your request and locating a match. Please contact your local municipality and/or regional Land Registry Office for the original Name of Township, Concession Number, Township Lot Number and a list of previous owners of the property in question. “*” essential information

County/Municipality/District *		Concession Number *			
Township (Original Township) *		Township Lot Number(s) *			
Name of Original Owner/Previous Owners (at the time of well construction) and/or Name		Name	Name of Construction Co. (if any) *		
Name of Original Well Contractor		Approximate Year Well was Constructed/Abandoned	MOE Water Well Record No./Audit No.		
Type of Well		<input type="checkbox"/> Drilled	<input type="checkbox"/> Bored	<input type="checkbox"/> Dug	<input type="checkbox"/> Other <input type="checkbox"/> Unknown
Property Address					
Sub-Lot/ Plan Number/ Parcel Number/ Roll Number		Longitude (Degrees, Minutes, Seconds)		Latitude (Degrees, Minutes, Seconds)	