



2455 Patterson Street | Suite 3 | Klamath Falls, Oregon 97603 | 541.850.2503 | 541.883.8893 fax | www.kwua.org

## Ground Water 2010

Applicant: \_\_\_\_\_ (if applicant is not the owner, must provide authorization to represent the owner.)

Mailing address: \_\_\_\_\_

EIN or Social Security Number \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Owner (if other than applicant): \_\_\_\_\_

Owner mailing address \_\_\_\_\_ Owner phone number: \_\_\_\_\_

PP&L meter number for this well \_\_\_\_\_

This program is for the pump in the well only. Are there other loads on this meter? \_\_\_\_\_