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APPLICATION FOR A GROUNDWATER PERMIT

FORM B

To be completed in triplicate (3)

Complete this form if you want to register, or to obtain a permit for, a borehole or use of groundwater. If you are applying for a permit to use water from a borehole, you must attach the borehole completion report for that borehole (Sixth Schedule).

1 NAMES AND ADDRESSES	
Name of Individual/Association/Company/Public Authority *	
Address:	
Telephone:	
Designation:	
Acting for Company/Partnership/Cooperative Society/Public Corporation*	
District:	
Postal address (if different from above):	
* Delete what is not applicable	

2 LAND REQUIRING WA	TER
---------------------	-----

Name of landowner will Constructed and water			
Address of owner:			
Property regime of lan	d:		
() Bonafide Occupat	nt () Mailo () Customary () Lease hold	l () Freehold
If leasehold, indi	cate: Folio	Number	
If Mailo or Lease	chold indicate: Block	Plot No.	
Location of land where	e		
the borehole is or will	be:		
District:		Area of that land	(in Hectares)
County:	Sub-county:	Parish:	Village:

3SOURCE OF WATER		
Select the source of water as appropriate: () Borehole () Other. Specify:	() Dug well	() Spring

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4 DETAILS OF THE BOREHOLE	
Borehole No:	
Date drilled:	. Driller:
Diameter:	Depth:
Linning/Casings:	. Test Yield:
OFFICIAL USE ONLY	
Basin:	Aquifer type:
National Grid Reference of point of water upta	ake: Long: Lat.:

5 USE OF WATER OR WORKS	
Tick one or more boxes as appropriate	
Use or proposed use of water	Mean Volume (cubic metres per day)
 () Irrigation () Livestock () Urban domestic () Rural domestic () Industrial () Fisheries () Services () Power generation () Recreational () Other. Specify 	
TOTAL ME	EAN VOLUME

6. CONSTRUCTION DETAILS		
Type of pump: () Centrifuge () Other. Specify	() Submersible	() Solar
Type of driving machine and fuel used: Brake horse power of machine: How is pump connected to driving machine?	HP. Elevation of pump above sea lev	velmetres
Internal diameter of suction main:inches Height to which water is to be lifted above pump:		metres
Length of delivery pipe: Quantity of water to be pumped when plant is workin How do you propose to measure the volume or water		

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7 OTHER INFORMATIO What alternative sources of water does)N		
what allernative sources of water does			
		ly () Rural water supply	
() Other, Specif	for	ly () Rural water supply	
() Outer open-	LY		
Existing boreholes within one kilometr	res of the site to which this appli	ication refers are:	
If so How many?	()		
Borehole number (if known):	() Yes	Distance from site	
Dorenoie number (ir kilo wil).		Distance iron site	
(Attach a sketch man, on a scale not]	less than 1.25 000 showing land	d boundaries, the approximate position of the	
		roposed boreholes and any source of surface	
water.)	, within one interior of the r	toposed obtenetes and any search of small	
	nermit?		
For how long will you require a water p Is the source of water located in an area	a of gazetted water authority? () No () Yes	
Name of water authority	a of guzetted mater addressey.		
Tune of mater addressey			
DECLARATION OF THE APPLIC	CANT		
I certify that the information provided in this form is correct to the best of my knowledge. I also agree that no decision will be made pursuant to this application until I receive a notification from the Director of Water Development that I have provided all the necessary information. Signature of applicant Seal/Stamp			
Full names	Date:		
Full names	Date:		
Full names	Date:		
NOTE			
NOTE When you have completed this form	and the appropriate attachmen	ts, you must attach CASH or CHEQUE for	
NOTE When you have completed this form Ushsfor processing the appli	and the appropriate attachmen		
NOTE When you have completed this form Ushsfor processing the appli The Director	and the appropriate attachmen lication and send them to:		
NOTE When you have completed this form Ushsfor processing the appli The Director Directorate of Water	and the appropriate attachmen lication and send them to:		
NOTE When you have completed this form Ushsfor processing the appli The Director	and the appropriate attachmen lication and send them to:		
NOTE When you have completed this form Ushsfor processing the appli The Director Directorate of Water P.O. Box 20026 Kampala	and the appropriate attachmen lication and send them to: r Development	ts, you must attach CASH or CHEQUE for	
NOTE When you have completed this form Ushsfor processing the appli The Director Directorate of Water P.O. Box 20026 Kampala The Director may require you to adver	and the appropriate attachmen lication and send them to: r Development rtise this application at your cost		
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 RECEPTION DATE: (D) (M) (Y)

 APPLICATION NUMBER:

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BOREHOLE COMPLETION REPORT

WATER POINT INFOR	RMATION	
1. IDENTIFICATION A	AND LOCATION DATA	
Type of water point: ()	Borehole: () Dug well: () A	Augered shallow well:
Identification: Project I.D). No	
Location: Longitude E:	Latitude: N/S:	Altitude(m):
District:	County:	Sub-county:
Parish:	Village:	Water point:
Water point ownership:	() Private: ()Communal	l: () Institutional
Water point use:	() Domestic () Irrigation:	()Livestock: () Industrial:
Water point abandoned:	() Low yield: () water quali	ity: ()
Technical:		
Date abandoned:		
2. SITESELECTION DA	ATA	
Site by: Organization:	Name of person:	Title:
Date sited:	Method of site selection:	Resistivity:Electromagnetic:
Seismic:Other, s	specify:No	one:

Attach site selection results

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3. CONSTRUCTION DATA				
Contractor:	Drilled by: Name of person:			Title:
Method of construction:	() Air rotary	() Cable tool:	() Mud rotary:	
	() Augered:	() Dug:	() Other, specify:	
Date for completion of con	struction:			
Total well depth at date of	completion (m):			
Water well diameter:	mm:	From:	To:	-
	mm:	From:	To:	
	mm:	From:	To:	-
	mm:	From:	To:	-
Permanent casing/well ring	g diameter: mm:			
Permanent casing/well ring	g material:	() PVC:	() Mild steel:	
		() Concrete:	() Bricks:	
		() Other:		
Borehole sealing:	() None:	() Cement:	() Bentonite:	() Other,
Filter slot size & intervals:	mm:	From:	To:	-
	mm:	From:	To:	-
	mm:	From:	To:	-
Borehole filters:	() Gravel pack:	() Natural pack:		
Well development:	Duration (hrs):			
Method of development:	() Air lift:	() Bailed:	() Compressed ai	r:
	() Other (specify	y):		

4. INSTALLATION DATA
Type of pump: () Submersible pump: () Centrifugal pump: () Hand pump: () Bucket:
() Other
Date of pump installation: day/month/year:
Name of pump: Pump capacity:m ³ /h
Pump installation/intake depth: m b.g.l.
Riser pipe material: () Galvanized iron: () Stainless steel: () PVC: () other
Riser pipe diameter:mm
Pumping rod material: () Galvanized iron: () Stainless steel: () Wire: () other
Pumping rod diameter:mm

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5. HYDROG	EOLOGICAL DA'	ГА		
Depth to bedro	ock: m b.g.l.:			-
Overall geolog	gical setting:			_
Lithology:	From:	To:	Description:	_
(m b.g.l.)	From:		-	
	From:	To:		
Water strike, A	Aquifer and yield:			
Water strike (1	m.b.g.l)	Aquifer	Yield m ³	/h

HYDRO CHEMICAL DATA

6. HYDROCHEMICAL DATA						
Date of sampling: day/month/year:						
Sampling method: () pumping:	() Air-lift samplir	ng: () Bucke	et:			
Sample preservation: () None: () Acid: () Other:						
Samples analyzed: Name: Organization						
		Result	Date	Field/Lab		
Turbidity	FTU					
Temp. (Time of sampling)	°C					
Conductivity	uS/cm					
pH						
Tot. alkalinity (CaC0 ₃)	mg/l					
Hardness (CaC0 ₃)	mg/l					
Calcium (Ca ²⁺)	mg/l					
Magnesium (Mg ²⁺⁾	mg/l					
Sodium (Na ⁺)	mg/l					
Potassium (K ⁺)	mg/l					
Carbonate $(C0_3^+)$	mg/l					
Bicarbonate (HC0 ³)	mg/l					
Sulphate $(S0_4^2)$	mg/l					
Chloride (Cl)	mg/l					
Nitrate (N0 ₃)	mg/l					
Ammonium (NH_4^+)	mg/l					
Tot. Iron $(Fe2++Fe3+)$	mg/l					
Manganese (Mn2+)	mg/l					
Fluoride (F)	mg/l					
Free Carbon dioxide (C0 ₂)	mg/l					
Free Carbon dioxide (C0 ₂)	mg/l					
Tot. dissolved solids	mg/l					
Faecal Coli	no/100ml					

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7. YIELD TEST, FLOW AND WATER LEVEL DATA

Test carried out by: Organi	ization:	Name:	Title:			
Date of test:	Duration of test:	hrs.				
A. Step pumping test: () $V_{es}/($) No					
A. Step pumping test. () 1657 () 100					
Step Yield (m ³ /h)	Draw down (m)	Spec. Capacity (m ³ /h/m)				
1						
2						
4						
B. Constant discharge: () Yes / () No						
Average discharge during test (m ³ /h)						
		Date measured				
Pumping water level (m b.	g.l)	Drawdown (m)				
Transmissivity (m ² /day)	S	Spec. Capacity (m ³ /h/m)				
Hydro-fracturing: () Yes / () No. If yes day/month/year						

C. Natural flow: () Yes () No

D. Air Lift test: () Yes () No

Attach pumping test results.

8. OTHER INFORMATION (include information not catered for in the above sections)

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9. DETAILS OF ORGANIZATION SUBMITTING DATA

Name:	
Address:	-
Telephone Number:	<u>.</u>
Fax No:	-
E-mail:	
Name of responsible officer:	
Title:	
Signature:	
Date of data submission:	
Stamp of organization	